



2018 MISSOURI **MEDICAL PROFESSIONAL LIABILITY INSURANCE REPORT**

MISSOURI DEPARTMENT OF INSURANCE, FINANCIAL INSTITUTIONS
& PROFESSIONAL REGISTRATION

STATISTICS SECTION
MAY 2019

Other Publications

Available from the Missouri Department of Insurance, Financial Institutions & Professional Registration

The following reports are also available:

- *Missouri Market Share Report*
- *Missouri Real Estate Malpractice (Closed Claim Report)*
- *Missouri Legal Malpractice (Closed Claim Report)*
- *Missouri Products Liability (Closed Claim Report)*
- *Missouri Medical Malpractice Insurance Report*
- *Missouri Health Maintenance Organization Report*
- *Missouri Life, Accident & Health Supplement Report*
- *Missouri Property and Casualty Supplement Report*
- *Missouri Commercial Liability Report*
- *Missouri Mortgage Guaranty Report*
- *Missouri Uninsured Automobile Report*

Databases: *for data requests, contact the Statistics Section at 573-751-3163. Some data are available for a fee.*

- *Medicare Supplement Experience Data*
- *Property and Casualty Supplement Data*
- *Missouri Zip Code data for homeowners/ dwelling fire, farmowners (dwelling only, mobile home, earthquake, and private passenger automobile insurance.*

Many reports, including this complaint report, are available at no cost on the DIFP website, at <http://insurance.mo.gov/reports/> For paper copies, inquire with the Statistics Section at the above number.

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Executive Summary

Data Sources

This report is based upon data provided by insurers and self-insured hospitals to the Missouri Department of Insurance, Financial Institutions and Professional Registration (DIFP). These data include open and closed claims that insurance companies and self-insured hospitals are required to report under Section 383.105 RSMo. The DIFP makes every possible effort to make sure these data are accurate and complete. However, the accuracy of this report depends largely upon the accuracy of the data filed by insurers and self-insured hospitals.

Additional information is derived from the Missouri “supplement to the annual statement” (see <http://insurance.mo.gov/reports/suppdata>). These data contain information about market segment, volume of business, market share, losses and expenses.

Format of Report

Historically, the DIFP data consisted of one record for each claim. In many instances, a single injury will produce multiple defendants. In addition, a single defendant may have multiple insurance coverages implicated in a single claim (for example, basic and excess policies), and each coverage counted as a single claim. For purposes of this report, all individual claims are aggregated for each plaintiff / injured party, as well as for each health care provider implicated in a liability action.

The scenario in the following table illustrates how a single legal action spawns 6 claims, even though there are only three defendants. As aggregation on a *per claimant* and a *per defendant* basis is much more meaningful than the traditional *per claim* aggregation, the latter has been dropped from the report. Individuals interested in the traditional claim counts should contact the department.

Comparison of Claimant, Defendant and Claim					
Claimant	Count	Defendants	Count	Claims	Count
An individual brings a claim against a physician, a radiologist, and a hospital, all of whom are alleged to have contributed to a given injury or related injuries	1	Physician	1	Physician's primary carrier reports a claim	1
				Physician's excess carrier reports a claim	1
		Radiologist	1	Original claim against a radiologist is closed due to inactivity	1
				The claim against the radiologist is subsequently reopened due to the filing of a lawsuit	1
		Hospital	1	Hospital reports a claim against its self-insured funds	1
				Hospital's excess carrier reports a claim	1
Total	1		3		6

Highlights

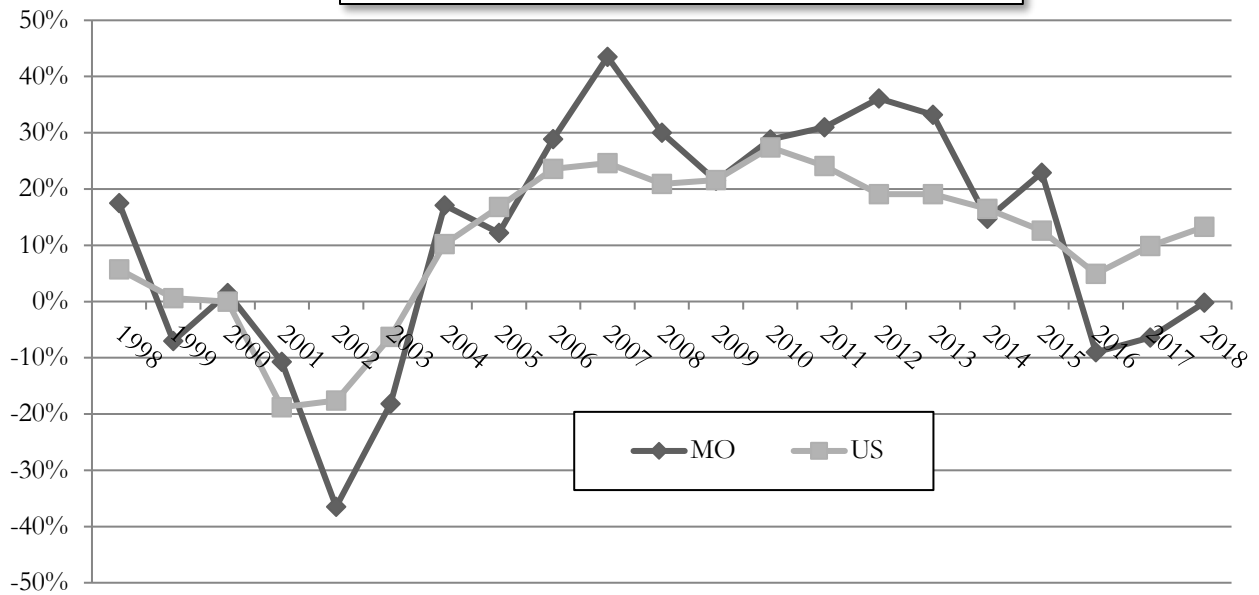
Data for physicians and surgeons, hospitals and other medical care providers are summarized in this report. The category of “other medical care providers” includes, but is not limited to, dentists, nurses, nursing homes, chiropractors, pharmacies, optometrists, podiatrists/chiropractists, clinics, and corporations.

Among the findings of the report are:

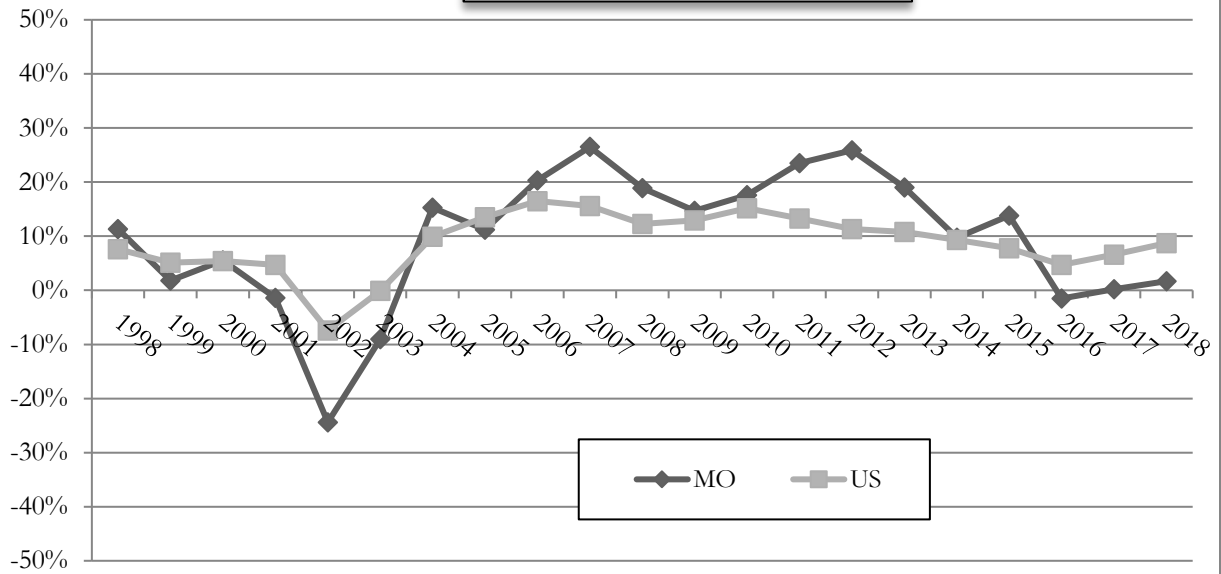
■ **Profitability** In 2016, medical professional liability insurers returned a loss in Missouri for the first time since 2003. In both 2017 and 2018, underwriting results were still negative, though when factoring in additional revenue such as investment income, insurers managed a positive return in both years, earning a 0.2 and 1.7 percent return. Claims incurred plus loss adjustment and administrative costs amounted to 122 percent of earned premium in 2017. Nationally, profitability has also been trending downward in recent years.

Incurring claims increased slightly between 2017 and 2018, rising from \$79.7 to \$86.1 million. Defense and adjustment expenses related to settling claims, the largest expense component for medical professional liability insurance aside from claim payments, represent an additional 20 percent of premium (page 6).

Profit on Insurance Transactions

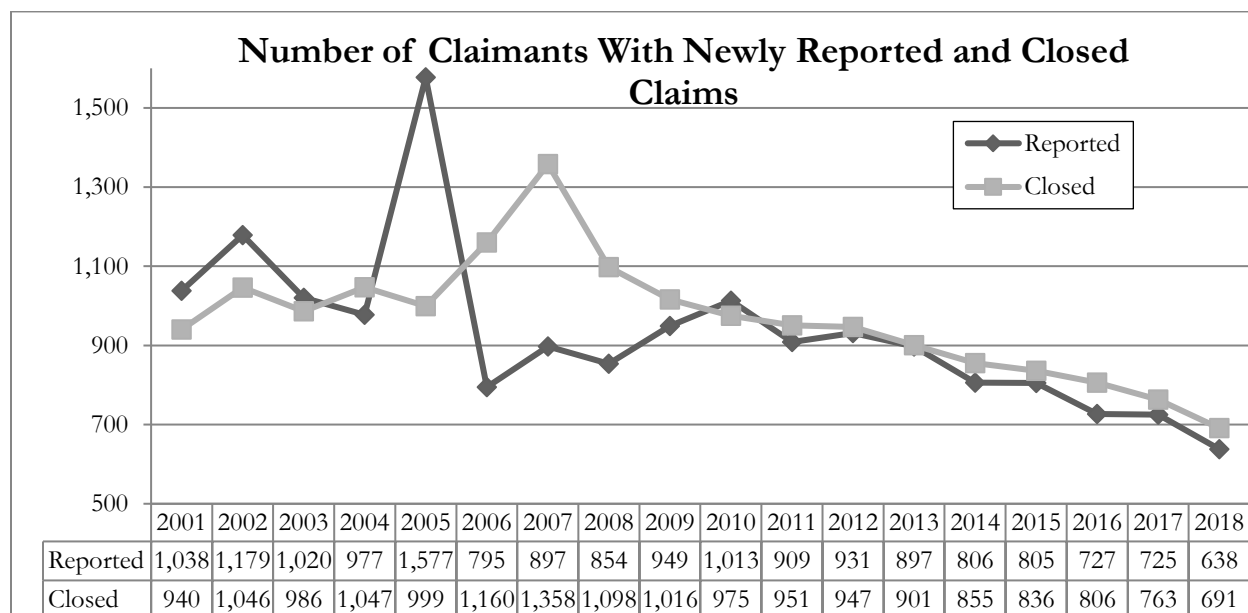


Return on Net Worth



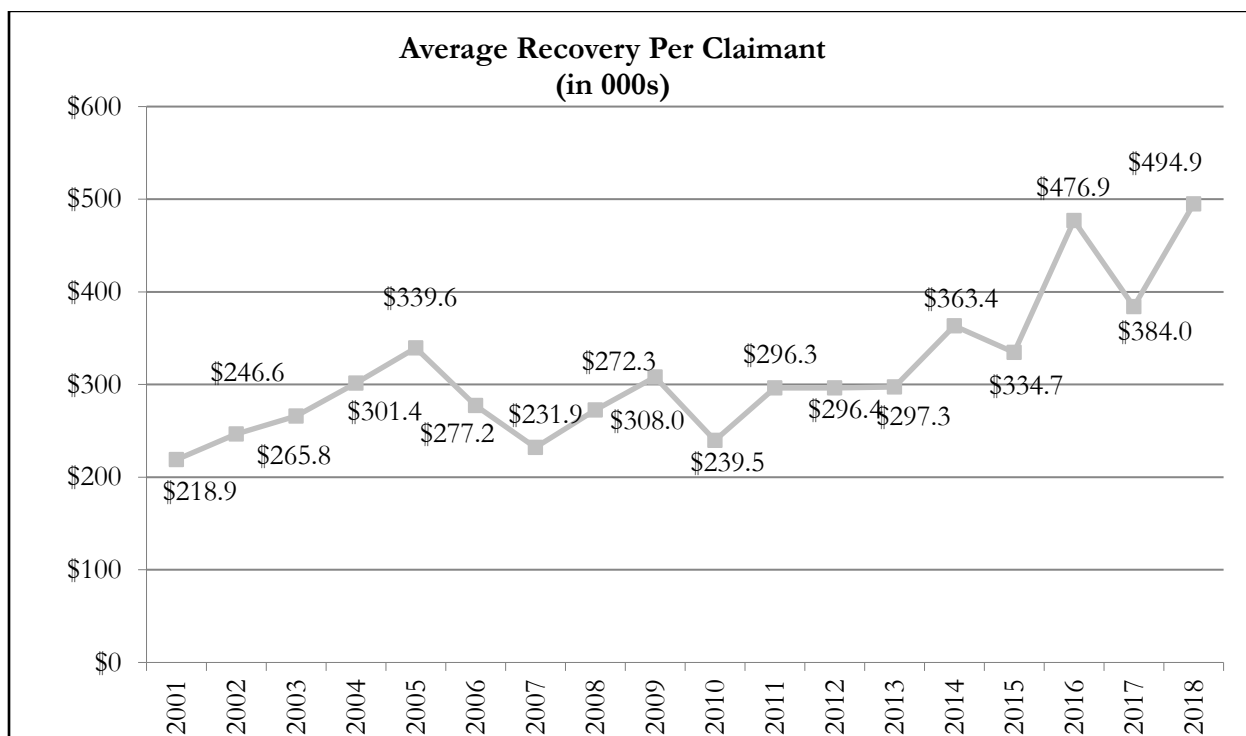
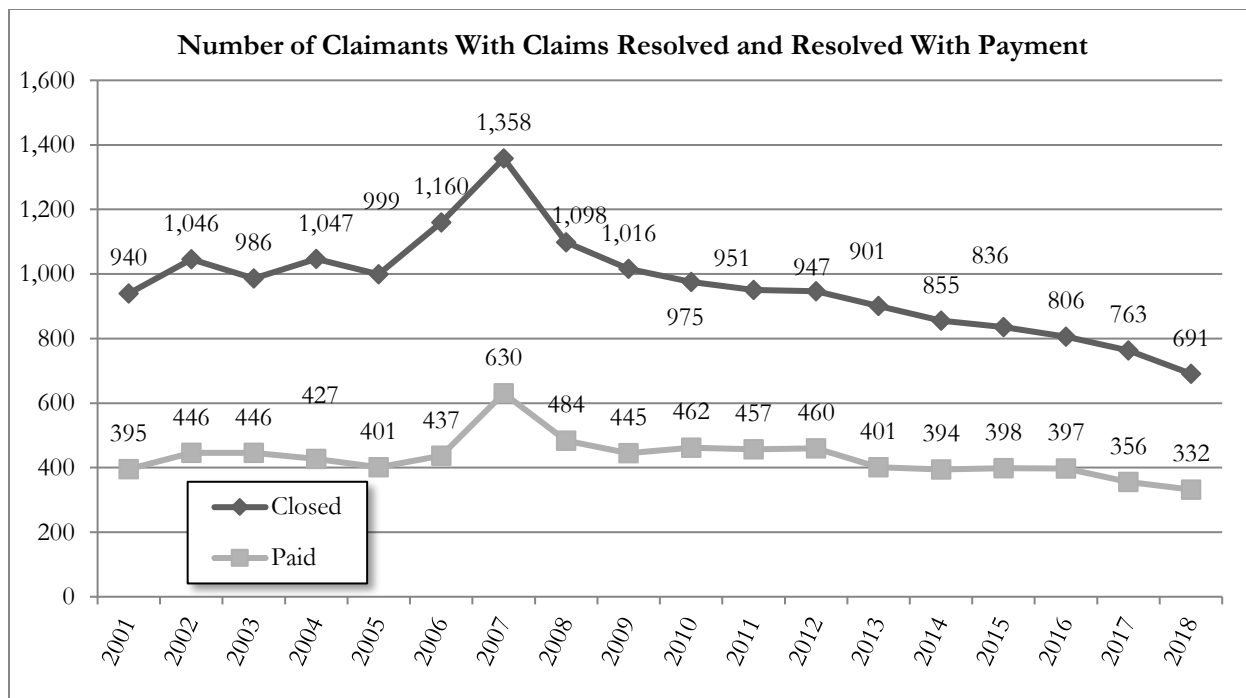
New Incidents Reported and Claims Closed

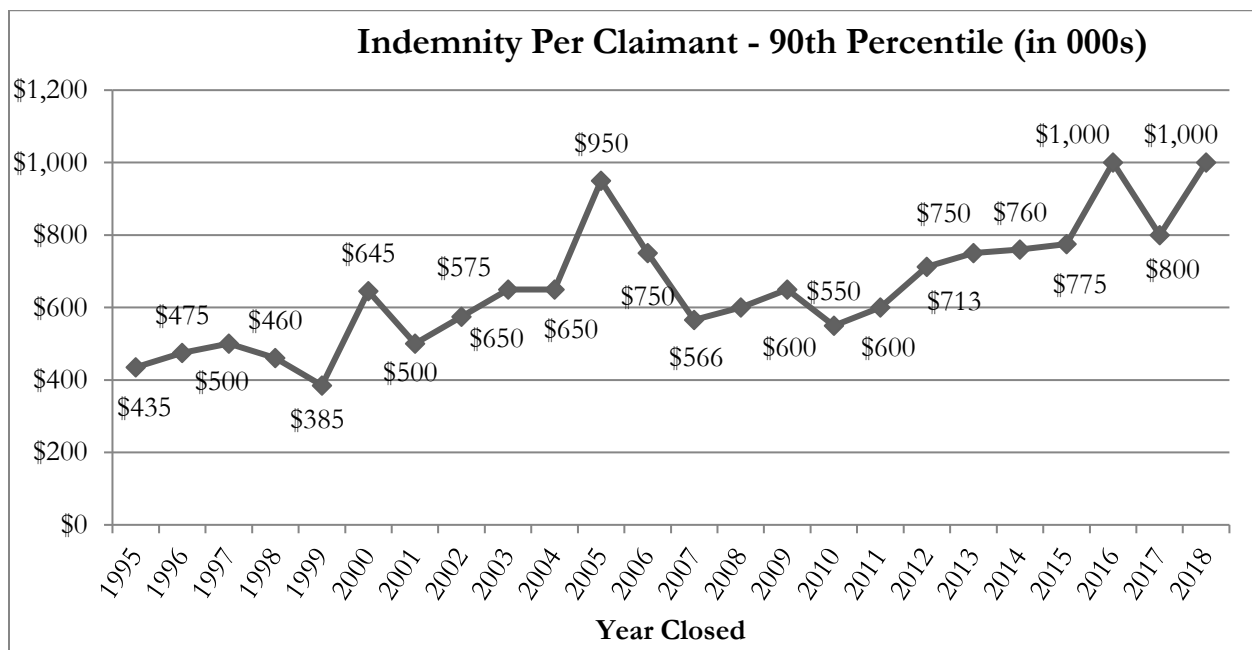
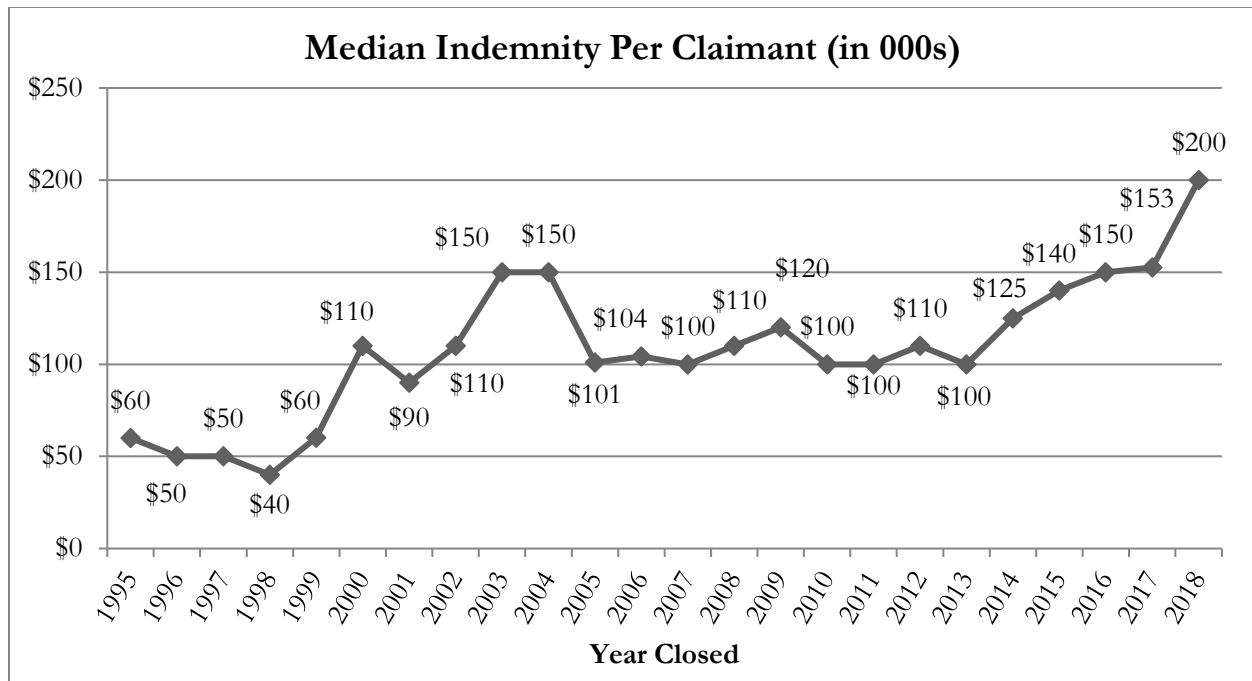
■ After new claims spiked sharply in 2005, newly-opened claims declined substantially in subsequent years. Aside from the anomalous 2005 spike in new claims (a direct result of legal changes implemented in that year), the number of claims reported has declined substantially in recent years, and by 2018 stood at 638.

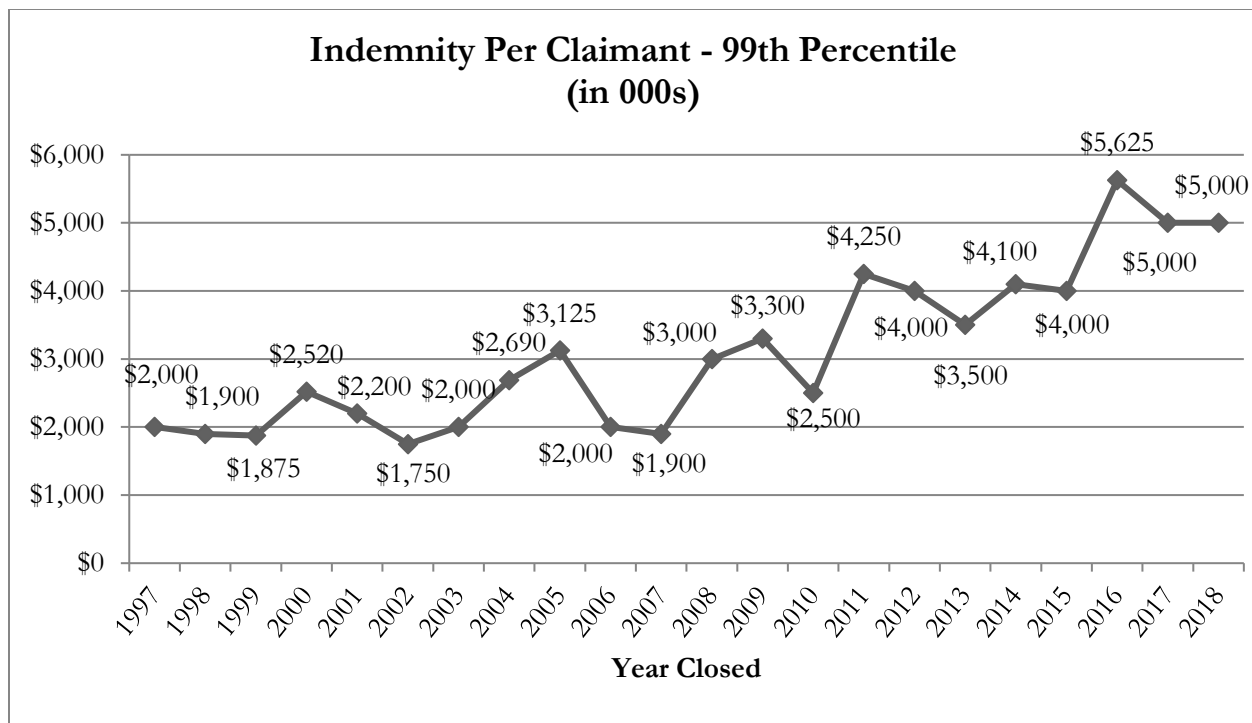


■ After a significant increase in 2007, the number of claimants receiving a recovery subsequently declined. However, the average award per claimant increased significantly in 2018, rising to \$494,874, a new high.

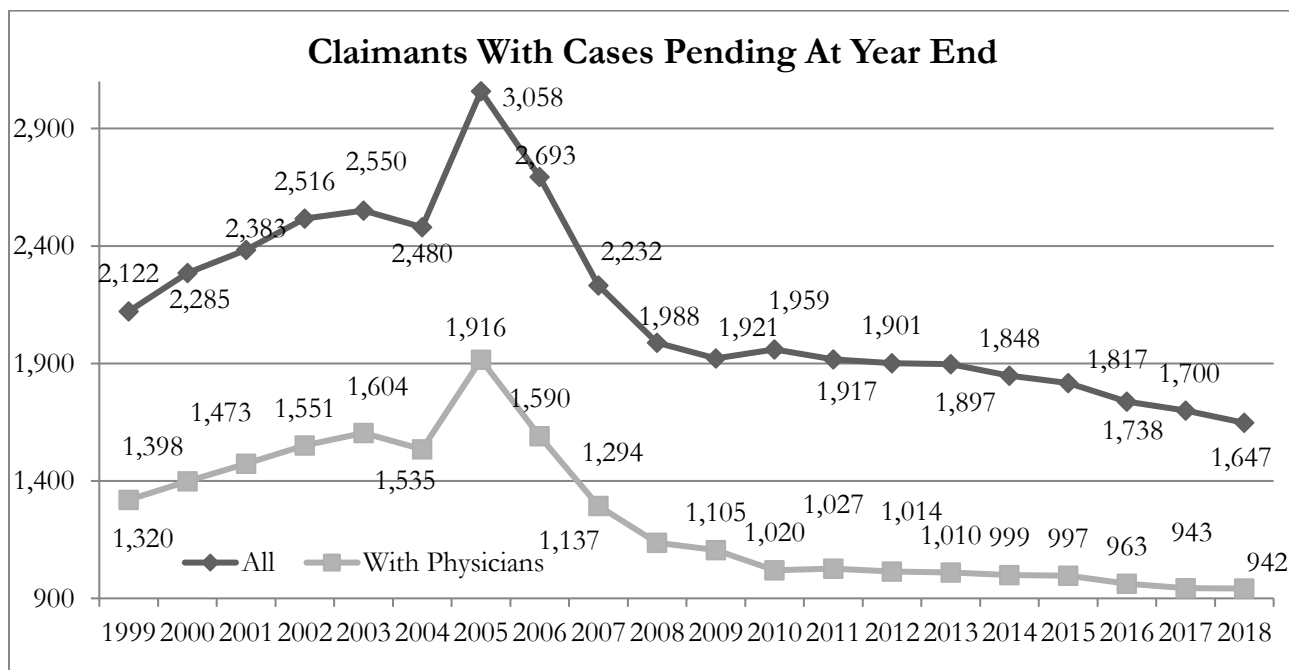
The median amount received by each claimant in 2018 stood at \$200,000, up significantly from prior years. In 2018, recoveries at the 90th and 99th percentiles were \$1 million and \$5 million respectively.







■ The number of claimants with pending actions at the end of a year has declined substantially since 2005, reaching historic lows.



Factors Impacting the Price of Medical Professional Liability Insurance

Many factors affect the cost of claims. This report does not undertake a comprehensive, rigorous analysis of various cost factors. Past reports have highlighted inflationary pressures on claim costs. The economic component of indemnity payments consists primarily of lost wages and incurred medical costs, both of which have tended to increase more rapidly than the general rate of inflation.

No conclusions are presented in this report about possible future trends. Given the large annual fluctuations in average payments, several years of data are necessary to make credible future projections. Even with a sufficient time series, analyses are difficult when costs are impacted by moving and contrary forces. The difficulty is augmented by the significant changes that have occurred in Missouri's tort environment, such that prior trends may no longer be operative, and possible emerging new trends are too recent to provide a credible basis for projections. For example, several significant changes occurred with respect to the tort environment over the last decade. Prior to 2002, a single inflation-adjusted cap limited the amount each plaintiff could recover for non-economic damages in a medical liability action. In January of 2002, the Missouri Court of Appeals, Eastern District, ruled that the cap could be "stacked" across defendants or applied separately to each discrete act of malpractice from a single individual (**Scott vs. SSM Healthcare**). In 2005, the legislature lowered the cap to a non-inflation-adjusted amount of \$350,000, and applied it to total recovery from all defendants party to a single liability action. More recently, the Missouri Supreme Court ruled that the cap on non-economic damages was an unconstitutional infringement on the right to a jury trial (**Watts vs. Cox**). In 2015, the MO legislature enacted new caps. For more minor injuries, caps were set at \$400,000. Injuries defined as catastrophic were subject to a higher cap of \$700,000. Both caps are annually adjusted by a constant rate of 1.7 percent. For 2018, the caps stood at \$427,901 and \$748,828.

Nature and Substance of Allegations and Health Outcomes

Allegation and health outcome data are derived from the narrative of events alleged to have caused an injury that are submitted with each claim form. Narratives are coded according to taxonomies developed by the DIFP. Every effort was made to code each occurrence according to the most proximate cause of the alleged medical injury, rather than the actions of defendants whose involvement was less central. For example, if an individual received an unintentional cut during surgery, which subsequently led to an undiagnosed infection, the case would be coded as “cut, puncture or tear during surgery.” To date, the DIFP has coded nearly 15,000 medical professional liability actions extending back to 2005.

Following the categories of the National Practitioner Data Bank (NPDB), allegations are grouped into the following eight categories:

Adverse Outcomes by Medical Category Closed Occurrences, 2005-2018 Percent			
Category of Alleged Medical Error	Occurrences	Paid Occurrences	% Total Payments
Surgery	31.0%	29.7%	29.2%
Non-surgical treatment	18.0%	18.3%	13.7%
Diagnosis	17.9%	18.2%	25.9%
Patient Safety / Ethics / Legal	15.2%	15.2%	6.5%
Medication	8.4%	8.6%	5.3%
Pregnancy & childbirth	6.1%	6.5%	16.8%
Anesthesia	1.9%	1.6%	1.7%
IV & Blood Products	1.5%	1.8%	0.9%
Total	100.0%	100.0%	100.0%

Across all categories, just a few general types of allegations accounted for more than 90 percent of cases. Interestingly, injuries unrelated to medical treatment were among the largest sources of claims, with nearly 1,900 claimants seeking compensation for falls on hospital grounds, assaults from medical staff or other patients, and injuries during transport, among other causes. Over the period 2005-2018, insurers paid out nearly \$147 million as a result of such claims. Pregnancy and birth-related claims accounted for 6 percent of all claims, but nearly 16 percent of total claim payments. Injuries sustained during surgery or non-surgical treatment also account for a high volume of cases. Among this class of injuries, the most common was *unintentional cut, tear or burn* during the procedure (1,625 cases). Additional types of injuries of this class include cardiovascular side-effects of treatment, such as heart attack, stroke, or embolism; or respiratory side-effect (730 cases), and an assortment of other types of less-defined injuries (667, classed as “Other injury during or as a result of procedure”).

This category excludes other specific types of injuries, such as retained surgical materials (364 cases), and surgeries or other procedures performed on the wrong patient or the wrong body part (159 cases). Claims involving misdiagnoses and other diagnostic issues (excluding physical injuries incurred during a diagnostic test) accounted for 2,892 cases and \$593 million in payments since 2005.

The following tables include only the broadest classifications of alleged medical errors. Much more detailed tables are included in the body of the report.

Top 20 Most Common Allegation Categories Medical Professional Liability Closed Claims, 2005-2018				
Allegation Type	Claimants	Claimants Receiving Payment	Average Payment	Average Injury Severity (1-9 Scale)
Diagnostic Errors	2,581	1,230	\$452,723	6.4
Non-treatment injuries (falls, etc)	1,716	998	\$143,898	4.9
Cut, puncture or tear during procedure	1,486	764	\$280,431	5.3
Post-treatment infection	1,154	499	\$275,022	6.0
Pregnancy & Childbirth	877	446	\$847,780	7.0
Inefficacious treatment	781	274	\$229,018	4.8
Adverse reaction to correct medication and dose	720	199	\$299,432	5.1
Medication Error (incorrect med or dose)	681	480	\$196,940	4.5
Cardiovascular / respiratory complication of	659	332	\$521,622	7.2
Improper use of equipment / equipment failure	645	284	\$253,817	4.8
Other physical trauma from treatment	600	228	\$302,747	4.4
Denial of care / patient abandonment	444	54	\$323,982	3.6
Foreign body retained	344	195	\$118,980	3.9
Ethical / legal misconduct	305	121	\$88,034	1.2
Non-administration of necessary care	212	100	\$332,010	6.3
Informed consent / unnecessary procedure	204	68	\$241,751	4.2
Other problem with surgical site	155	65	\$460,467	4.7
Wrong patient / body part	147	109	\$307,094	4.4
Delay in treatment	65	29	\$417,070	6.6
Communication failure	61	15	\$239,167	6.0
Subtotal	13,837	6,490	\$329,936	5.4
Total	1,186	427	\$248,520	4.9
% Top 25	92.1%	93.8%		

*Many patient abandonment cases arise from the incarcerated population, and involve allegations of civil rights violations and deliberate denial of necessary medical care.

Among all diagnostic-related cases (most commonly misdiagnoses or failure to diagnose), most involved cancers of various forms (680 cases), of which the most common was breast cancer (139 cases). This category was followed by heart conditions (258 cases), fractures (212 cases), digestive disorder (203 cases) and strokes (194 cases) comprising the top 5. Diagnosing a healthy patient with a condition was the 7th most common diagnostic error, with 85 cases during the period.

Diagnostic-Related Claims, 2005-2018 By Medical Condition					
Infectious / Non-infectious Condition Indicator	Medical Condition	Claimants	Claimants Receiving Payment	Average Payment	Average Injury Severity (1-9 Scale)
NI	All Cancer	625	293	\$417,101	7.0
NI	Heart Condition	238	135	\$422,673	7.9
NI	Fracture	193	58	\$127,906	3.8
NI	Digestive disorders	185	91	\$398,247	5.8
NI	Stroke	170	84	\$562,310	6.6
NI	Embolism/ thrombosis	102	59	\$387,352	7.3
NI	Healthy patient misdiagnosed with	80	34	\$155,421	3.5
NI	Traumatic injury to internal organs	66	32	\$376,469	7.2
NI	Hematoma / aneurysm	59	35	\$526,475	8.1
NI	Spine / spinal cord disorder	54	22	\$948,697	5.9
I	Respiratory infections	50	23	\$281,674	6.8
I	Meningitis, encephalitis, and	46	31	\$1,031,868	7.7
NI	Traumatic injury to spine	45	20	\$1,020,092	5.8
NI	Injury to tendons or muscle	40	10	\$86,433	6.2
NI	Diseases of the genitourinary system	35	18	\$485,139	5.9
NI	Diseases of the reproductive system	30	14	\$240,446	5.0
I	Digestive disorders	29	11	\$57,727	4.8
NI	Nutritional and metabolic disorders	26	16	\$956,208	7.6
NI	Visual condition	23	13	\$535,084	5.9
NI	Musculoskeletal disorder order-	22	8	\$1,511,250	4.2
I	Infection of spine / spinal cord	18	6	\$928,056	6.3
I	Musculoskeletal infection excluding	16	11	\$769,091	5.5
I	Development of septic condition during	16	12	\$664,125	7.5
NI	Blood and immune disorders	15	10	\$579,417	6.9
NI	Diabetes	14	8	\$344,388	6.4
Top 25		2,197	1,054	\$462,055	6.4
All Diagnostic-related Claims		2,342	1,095	\$456,748	6.2
% Top 25		93.8%	96.3%		

Additional tables display data on the most common initial conditions ultimately leading to a claim.

Patient Outcomes

The final tables in Section VIII display data on health outcomes attributable to an alleged error. As would be expected, the most severe injuries are associated with the highest payouts. The following table includes all outcomes for which the average indemnity amount exceeded \$500,000. Almost all injuries in this category entail significant life-long impairment, such as significant neurological or spinal injury, loss of limb(s) or organ function, or loss of vision or hearing.

Medical Outcomes, 2005-2018 With Average Payment > \$500,000			
Outcome	No. of Claimants	Claimants Receiving Payment	Average Payment
Cerebral palsy	73	49	\$1,994,038
Quadriplegia	53	34	\$1,885,203
Progression - meningitis	14	8	\$1,866,000
Paraplegia	138	77	\$1,522,666
other cognitive or neurological deficit	639	311	\$1,176,435
Hemiplegia	22	11	\$1,127,273
Full - loss of hearing	2	2	\$1,037,500
Progression - encephalitis	3	1	\$1,025,000
Wrong site surgery	1	1	\$1,000,000
Coma	12	5	\$930,000
Contraction - meningitis	15	2	\$840,000
Full - loss of vision	48	26	\$770,217
Stroke	164	72	\$710,611
Perm - full loss of organ	32	18	\$702,326
Perm - partial loss of organ	306	92	\$633,096
Contraction - sepsis	81	34	\$599,756
Cauda equine syndrome	19	11	\$562,047
Amputation of two or more limbs	15	7	\$559,769
Amputation / loss of other body part	218	92	\$533,568
Amputation of hands/feet	38	14	\$511,372
Amputation of one limb	196	97	\$504,842

Generally, average indemnity closely follows the severity of injury attributable to an alleged medical error. However, in interpreting average payments by injury severity, readers should recognize that cases departing from this pattern may be explicable by other factors. For example,

economic damages, or compensation for monetary losses such as additional medical costs and lost wages, can vary considerably across cases that readers may believe are otherwise comparable. Non-debilitating cases, such as accidental sterilization or cosmetic issues, may entail little or no lost wages or additional medical expense. In these instances, economic damages would be minimal. Indemnity payments would primarily consist of compensation for non-economic injury (pain and suffering, diminished quality of life, loss of consortium, etc). On the other hand, awards for cases involving minimal physical injury can be substantially higher than might be expected. For example, a healthy person misdiagnosed with a terminal cancer would likely be traumatized, perhaps to the point of making life-altering decisions. Even though no *physical* injury has occurred (this case would be coded “1,” or the least severe category on the nine-point injury severity scale), both economic and non-economic damages could be considerable.

Lastly, it is worth emphasizing that the allegation codes represent a claimant’s version of events (as relayed to DIFP by an insurer). In some instances, events can be readily verified by an insurer. For example, concrete outcomes such as retained surgical material or operations on the wrong patient can be known with a high degree of certainty by all parties. However, fundamental facts of a case may be in dispute in many instances. Whether a patient contracted an infection while under care, or whether it was a pre-existing condition, may not be known with certainty by any of the parties involved in a dispute. Readers should exercise a degree of critical judgment when interpreting the data displayed in the allegation tables.

New to This Report

The term “never event” was introduced in 2001 by the National Quality Forum (NQF). Categories of “never events” were later developed in conjunction with the Centers for Medicare and Medicaid Services (CMS). In general, such events are defined as unambiguous, readily quantifiable, and preventable. The occurrence of a never event is indicative of a lapse in expected standards of care or a failure of procedures. The list of never events was expanded in 2011, and includes serious events such as wrong site surgery, surgery on the wrong patient, medication errors, falls, and acts of self-harm among others.

In 2016, the DIFP began coding medial liability claims data according to never event criteria, based on the narratives submitted by insurers with each claim. Due to limitations of the data (as well as the medical expertise of DIFP analysts), such events are divided into “never events” when strict definitional criteria can be reasonably be assessed by the information provided, and “never event-type occurrences” when data are indeterminate with respect to such criteria, or when health outcomes do not meet the injury-severity thresholds required for a strict “never event.” See Section VII for additional explanation.

Never Event Type Occurrences, Claims Closed 2005-2017									
		Never events that include assessment of injury severity where applicable				Never event type occurrence without reference to injury severity			
Event description	Definition includes injury severity	Claims Closed	Claims Closed with Payment	Total Paid	Average Payment	Claims Closed	Claims Closed with Payment	Total Paid	Average Payment
Surgical Events									
Wrong body part	N	138	99	\$23,998,926	\$242,413	138	99	\$23,998,926	\$242,413
Wrong patient	N	9	7	\$1,087,000	\$155,286	9	7	\$1,087,000	\$155,286
Wrong procedure	N	5	5	\$342,500	\$68,500	5	5	\$342,500	\$68,500
Foreign object retained	N	373	208	\$25,527,631	\$122,729	377	210	\$25,742,631	\$122,584
Injuries from Improper Use of Devices / Device Malfunction									
Contaminated drugs, devices or	Y	5	4	\$2,775,000	\$693,750	15	7	\$2,905,000	\$415,000
Device misuse/malfunction	Y	78	64	\$27,760,085	\$433,751	122	93	\$30,792,194	\$331,099
Air embolism	Y	21	18	\$9,401,844	\$522,325	21	18	\$9,401,844	\$522,325
Patient Protection Events									
Discharge of incompetent person	N	16	6	\$1,255,000	\$209,167	16	6	\$1,255,000	\$209,167
Patient Elopement	Y	12	12	\$4,398,155	\$366,513	13	12	\$4,398,155	\$366,513
Suicide / self-harm	Y	55	29	\$8,489,167	\$292,730	57	29	\$8,489,167	\$292,730
Care Management Events									
Medication error	Y	269	188	\$60,984,519	\$324,386	593	390	\$63,600,215	\$163,077
Administration of blood products	Y	13	10	\$7,112,000	\$711,200	13	10	\$7,112,000	\$711,200
Maternal death of healthy patient	Y	2	1	\$1,050,000	\$1,050,000	3	2	\$1,058,000	\$529,000
Death of neonate in low risk pregnancy	Y					602	305	\$307,097,144	\$1,006,876
Wrong donor sperm or egg	N	1		\$0		1		\$0	
Falls	Y	667	402	\$65,215,816	\$162,228	1,020	566	\$74,123,140	\$130,960
Pressure ulcers	Y	327	188	\$44,162,272	\$234,906	396	216	\$46,168,272	\$213,742
Loss of biological specimen	Y					11	8	\$297,748	\$37,219

Never Event Type Occurrences, Claims Closed 2005-2017									
		Never events that include assessment of injury severity where applicable				Never event type occurrence without reference to injury severity			
Event description	Definition includes injury severity	Claims Closed	Claims Closed with Payment	Total Paid	Average Payment	Claims Closed	Claims Closed with Payment	Total Paid	Average Payment
Environmental Events									
Electric shock	Y	1	1	\$650,000	\$650,000	2	2	\$660,000	\$330,000
Problem with oxygen or other gas	Y	7	7	\$2,080,000	\$297,143	7	7	\$2,080,000	\$297,143
Burns	Y	24	16	\$1,710,295	\$106,893	72	54	\$2,966,176	\$54,929
Injury from restraints / bedrail	Y	4	4	\$1,541,365	\$385,341	4	4	\$1,541,365	\$385,341
Radiological Events									
Metallic object in MRI	Y	5	4	\$468,077	\$117,019	7	5	\$476,827	\$95,365
Criminal Events									
Sexual abuse/assault	N	75	28	\$3,231,994	\$115,428	75	28	\$3,231,994	\$115,428
Assault	Y	4	3	\$587,499	\$195,833	18	13	\$2,174,499	\$167,269

Other never events excluded:

1. Intraoperative /postoperative death in an American Society of Anesthesiologists Class 1 patient – records are generally lacking in detail to determine class of patient. This event is therefore excluded entirely.
2. Care ordered by someone impersonating a health care provider – there are no instances of this type of event in the medical liability records
3. Death or serious injury of a neonate in a low-risk pregnancy – Since details of claims are almost always insufficient to identify a “low-risk pregnancy,” all deaths or serious injuries are classed as “never event-type occurrences” rather than “never events.”

Concepts and Definitions

Every attempt was made to make this report accessible to a broad readership. As such, technical terminology has been avoided where possible. However, readers should familiarize themselves with a few basic insurance terms.

Premium Written vs. Premium Earned

Premium Written: The cost of coverage for the full policy term, reported as of December 31st of the year in which a policy is issued, regardless of whether the policy term extends to future years. Written premium for a year includes premium adjustments, such as cancellations and changes in coverage, during the year for policies issued in the prior year.

Premium Earned: The dollar amount associated with the portion of the policy term that has elapsed by year-end.

The difference between written and earned premium can be better illustrated by example. Assume a one-year policy is issued on July 1, 2006, at a cost of \$1,000. At the end of the calendar year, the insurer will report \$1,000 of **written** premium on their financial annual statement. However, only half of the policy term will have elapsed at year-end. As such, only \$500, or one-half of the written premium amount, will be reported as **earned** premium. Earned premium is thus the amount of premium corresponding to the coverage actually offered during the year, since at year-end, half of the policy term will provide coverage in the future. For this reason, **earned premium** is the appropriate figure to use for assessing the performance of policy. For example, losses incurred during a reporting period correspond to elapsed coverage, and (obviously) not to coverage that will be extended at some future date.

Paid Losses vs. Incurred Losses

Paid Losses: The amount of claims payments distributed during the year. In many instances, especially for “long tailed” lines such as medical professional liability, paid losses may correspond to claims that were first opened perhaps many years prior to the date of payment. They may also represent payments on structured settlements for claims closed in prior years.

Incurred Losses: Paid losses plus the change in loss reserves for the year. Reserves are insurers’ expectations about how much will eventually be paid out on pending claims. Incurred losses include estimates of losses that have been incurred but not yet reported to the insurer (called “incurred but not reported,” or IBNR). Lastly, incurred loss amounts may reflect adjustments to estimates from prior years, since the true cost of a claim will become clearer as time passes.

The amount of **incurred losses** is the measure of underwriting performance in a given year, since paid losses typically represent losses incurred in prior years. However, it is important to stress

that **incurred losses** are *estimates*. The actual amount of total losses incurred during a year won't be known with certainty until many years in the future, when all pending claims are closed.

Components of Profitability

Loss Ratio: The ratio of incurred losses to earned premium.

Loss adjustment expenses: Defense and cost containment expenses plus adjusting and other expenses. Loss adjustment costs are the most significant expense component for medical liability insurance, and in some years exceeds even the amount of indemnity going to claimants.

Other Expenses: Other expenses consist of sales costs, general business expenses, taxes and fees, and dividends.

Other Revenue and Expenses: This category includes revenue streams other than premium, losses and expenses, such as investment returns, taxes, and fees. Medical professional liability insurance is a "long tailed" line, meaning that premiums are collected perhaps many years before claims payments will be made. This time lag creates opportunities for significant investment gains, which in turn can partially offset the cost of coverage. Investment returns are thus a significant component of revenue for insurers.

Profitability: Insurers are required to annually file a financial statement. This statement contains a "state page," on which is reported claim costs and expenses directly tied to the operations in each state. However, some expenses and revenues, such as federal taxes and investment returns, are not intrinsically tied to state operations, and are reported as national aggregates. To assess true profitability in a state, national expenses and revenues must be allocated to a state in some non-arbitrary manner. The National Association of Insurance Commissioners (NAIC) has developed a widely-accepted profitability formula that performs these allocations. The NAIC figures through 2010 are reproduced in this report. The 2011 figure was calculated by the DIFP in accordance with the NAIC formula.

Claimants with Claims Reported: The number of claimants that have initiated a claim with insurers during a year, plus prior claims that are reopened. For claimants with multiple claims, the case is considered opened only for the year the initial claim is filed.

Claimants with Cases Closed: The number of cases brought to final settlement during the course of a year. A case is considered closed during the year that the final claim is concluded.

Claimants Receiving a Payment: For closed cases, the number of claimants that received and indemnity payment.

Claimants with Pending Actions: Total number of claimants with at least one claim unresolved at year end, regardless of when the claim was first reported.

Average Indemnity: The average amount paid either to claimants (total claim indemnity / total number of claimants) or the average paid on behalf of defendants (total indemnity / total number of defendants). Average indemnity amounts exclude loss adjustment expenses, such as legal and defense fees.

Section I

Historical Trends

This section contains graphs depicting trends in professional medical liability insurance for:

- All medical providers combined
- Claims involving at least one physician & surgeon
- Claims involving at least one hospital

The tables and graphs are further categorized by:

Market Trends

- Licensed and non-admitted premium
- Analysis of carriers
- Profitability
- Historical premium and losses
- Missouri loss ratios
- Number of medical professional liability writers in Missouri

Frequency and Severity

- Number of new claims reported to insurers
- Average injury severity of new claims reported to insurers
- Number of closed claims
- Average injury severity of closed claims
- Average indemnity of closed claims
- Average loss adjustment expense of closed claims
- Claim by county of jurisdiction

Claim Disposition

- Number of months for paid claims from incident to disposition
- Number of months by injury severity from incident to disposition

Licensed and Non-Admitted Market, 2003-2017					
Year	Market Segment	Premium Written	Market Share	Premium Earned	Market Share
2004	Licensed	\$205,581,129	83.3%	\$202,932,568	83.4%
	Non-Admitted	\$41,074,434	16.7%	\$40,460,141	16.6%
	Total	\$246,655,563	100.0%	\$243,392,709	100.0%
2005	Licensed	\$190,032,878	81.7%	\$192,374,067	82.7%
	Non-Admitted	\$42,471,266	18.3%	\$40,308,168	17.3%
	Total	\$232,504,144	100.0%	\$232,682,235	100.0%
2006	Licensed	\$189,392,764	79.4%	\$191,237,043	79.8%
	Non-Admitted	\$49,120,606	20.6%	\$48,367,524	20.2%
	Total	\$238,513,370	100.0%	\$239,604,567	100.0%
2007	Licensed	\$169,414,624	78.2%	\$173,194,677	78.2%
	Non-Admitted	\$47,184,656	21.8%	\$48,402,085	21.8%
	Total	\$216,599,280	100.0%	\$221,596,762	100.0%
2008	Licensed	\$164,271,453	79.4%	\$167,194,346	79.4%
	Non-Admitted	\$42,535,711	20.6%	\$43,249,094	20.6%
	Total	\$206,807,164	100.0%	\$210,443,440	100.0%
2009	Licensed	\$155,867,385	76.9%	\$159,184,440	78.4%
	Non-Admitted	\$46,890,108	23.1%	\$43,878,085	21.6%
	Total	\$202,757,493	100.0%	\$203,062,525	100.0%
2010	Licensed	\$145,448,052	76.2%	\$145,359,818	75.8%
	Non-Admitted	\$45,522,402	23.8%	\$46,431,961	24.2%
	Total	\$190,970,454	100.0%	\$191,791,779	100.0%
2011	Licensed	\$138,335,771	78.4%	\$142,554,798	76.6%
	Non-Admitted	\$38,175,180	21.6%	\$43,605,934	23.4%
	Total	\$176,510,951	100.0%	\$186,160,732	100.0%
2012	Licensed	\$129,221,773	80.1%	\$131,620,895	79.9%
	Non-Admitted	\$32,177,497	19.9%	\$33,151,848	20.1%
	Total	\$161,399,270	100.0%	\$164,772,743	100.0%
2013	Licensed	\$120,659,064	76.0%	\$126,106,473	74.3%
	Non-Admitted	\$38,175,180	24.0%	\$43,605,934	25.7%
	Total	\$158,834,244	100.0%	\$169,712,407	100.0%
2014	Licensed	\$118,842,690	82.3%	\$117,910,519	81.3%
	Non-Admitted	\$25,598,079	17.7%	\$27,033,167	18.7%
	Total	\$144,440,769	100.0%	\$144,943,686	100.0%
2015	Licensed	\$114,306,152	80.6%	\$116,671,496	81.3%
	Non-Admitted	\$27,473,479	19.4%	\$26,804,992	18.7%
	Total	\$141,779,631	100.0%	\$143,476,488	100.0%
2016	Licensed	\$113,635,101	79.4%	\$113,264,712	79.6%
	Non-Admitted	\$29,570,516	20.6%	\$29,074,675	20.4%
	Total	\$143,205,617	100.0%	\$142,339,387	100.0%
2017	Licensed	\$110,581,910	78.3%	\$109,178,708	79.5%
	Non-Admitted	\$30,612,399	21.7%	\$28,171,922	20.5%
	Total	\$141,194,309	100.0%	\$137,350,630	100.0%
2018	Licensed	\$110,447,806	76.06%	\$111,473,769	77.81%
	Non-Admitted	\$34,757,355	23.94%	\$31,787,993	22.19%
	Total	\$145,205,161	100.00%	\$143,261,762	100.00%

2018 Market Share, All Companies With > 0.1% Market Share

Admitted or Licensed Companies			Surplus Lines and Risk Retention Groups		
Company	Premium Written	Market Share	Company	Premium Written	Market Share
Missouri Hospital Plan	\$27,721,220	19.09%	National Fire & Marine Insurance	\$6,764,482	4.66%
Medical Protective Company	\$14,288,311	9.84%	Columbia Casualty Company	\$6,218,690	4.28%
Medical Liability Alliance	\$11,613,515	8.00%	Norcal Specialty Insurance Company	\$2,906,867	2.00%
Norcal Mutual Insurance Company	\$9,758,530	6.72%	Caring Communities, A Reciprocal Risk	\$2,240,973	1.54%
Proassurance Indemnity Company Inc	\$8,037,005	5.53%	Illinois Union Insurance Company	\$2,196,256	1.51%
Doctors Company An Interins Exchange	\$7,807,974	5.38%	Saint Lukes Health System Risk	\$2,146,167	1.48%
Physicians Standard Insurance Company	\$5,148,594	3.55%	Endurance American Specialty Insurance	\$2,059,787	1.42%
Missouri Doctors Mutual Insurance	\$3,632,231	2.50%	Health Care Industry Liability Reciprocal	\$1,725,731	1.19%
MMIC Insurance	\$3,191,731	2.20%	Ophthalmic Mutual Insurance Company	\$1,039,577	0.72%
Keystone Mutual Insurance Company	\$2,522,941	1.74%	Evanston Insurance Company	\$956,278	0.66%
American Casualty Company Of Reading	\$2,507,566	1.73%	Oms National Insurance Company, Risk	\$930,826	0.64%
Health Care Indemnity	\$2,107,816	1.45%	Admiral Insurance Company	\$862,237	0.59%
NCMIC Insurance Company	\$1,720,504	1.18%	Steadfast Insurance Company	\$858,916	0.59%
Preferred Physicians Medical Risk	\$1,650,064	1.14%	Ironshore Specialty Insurance Company	\$803,045	0.55%
Pharmacists Mutual Insurance Company	\$1,182,633	0.81%	Orthoforum Insurance Company A Risk	\$623,093	0.43%
Physicians Insurance Mutual	\$1,122,996	0.77%	The Mutual Risk Retention Group, Inc.	\$601,480	0.41%
Liberty Insurance Underwriters	\$868,049	0.60%	Hallmark Specialty Insurance Company	\$522,101	0.36%
Professional Solutions Insurance	\$686,365	0.47%	Homeland Insurance Company Of New	\$482,287	0.33%
Fair American Insurance And	\$637,093	0.44%	Proassurance Specialty Insurance	\$427,481	0.29%
Preferred Professional Insurance	\$540,545	0.37%	General Star Indemnity Company	\$395,478	0.27%
Ace American Insurance Company	\$502,372	0.35%	North American Capacity Insurance	\$353,000	0.24%
Podiatry Insurance Company Of America	\$351,626	0.24%	James River Insurance Company	\$337,883	0.23%
Cincinnati Insurance Company The	\$346,139	0.24%	Allied World Surplus Lines Insurance	\$330,655	0.23%
Church Mutual Insurance Company	\$332,345	0.23%	Coverys Specialty Insurance Company	\$325,844	0.22%
Kansas Medical Mutual Insurance	\$320,220	0.22%	Landmark American Insurance Company	\$289,866	0.20%
Allied World Insurance Company	\$304,599	0.21%	Hudson Specialty Insurance Company	\$271,430	0.19%
Continental Casualty Company	\$201,439	0.14%	Capitol Specialty Insurance Corporation	\$259,550	0.18%
Aspen American Insurance Company	\$192,961	0.13%	Liberty Surplus Insurance Corporation	\$246,379	0.17%
Continental Insurance Company	\$177,035	0.12%	Aix Specialty Insurance Company	\$195,309	0.13%
			Aspen Specialty Insurance Company	\$175,988	0.12%
			TDC Specialty Insurance Company	\$167,478	0.12%

2018 Market Share – Physicians & Surgeons Coverage
(Companies with greater than 0.1% market share)

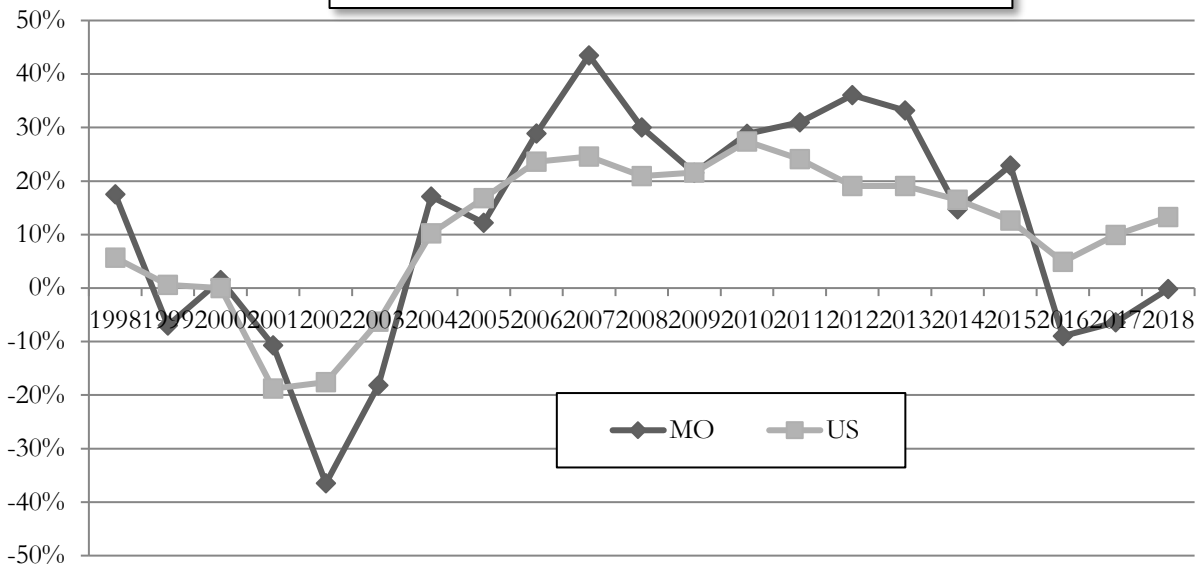
Company	Premium Written, 2016	Market Share
Medical Liability Alliance	\$10,695,073	16.30%
Medical Protective Company	\$10,594,974	16.15%
Norcal Mutual Insurance Company	\$9,758,530	14.88%
Proassurance Indemnity Company	\$7,435,704	11.34%
Doctors Company An Interins Exchange	\$7,241,314	11.04%
Physicians Standard Insurance Company	\$5,148,594	7.85%
Missouri Doctors Mutual Insurance Company	\$3,632,231	5.54%
MMIC Insurance	\$2,717,661	4.14%
Keystone Mutual Insurance Company	\$2,522,941	3.85%
Preferred Physicians Medical RRG	\$1,650,064	2.52%
Physicians Insurance Mutual	\$1,122,996	1.71%
Liberty Insurance Underwriters	\$868,049	1.32%
Fair American Insurance And Reinsurance Co	\$637,093	0.97%
Preferred Professional Insurance Company	\$322,720	0.49%
Allied World Insurance Company	\$304,599	0.46%
Kansas Medical Mutual Insurance Company	\$294,531	0.45%
Aspen American Insurance Company	\$192,961	0.29%
Medmal Direct Insurance Company	\$77,800	0.12%
Continental Insurance Company The	\$76,517	0.12%
Ismie Mutual Insurance Company	\$75,082	0.11%
Zurich American Insurance Company	\$73,017	0.11%
Kammco Casualty Company Inc	\$70,794	0.11%
Doctors Direct Insurance Inc	\$69,550	0.11%

Medical Professional Liability Profitability in Missouri, 1993-2016
All Writers, Including Excess and Surplus Lines Companies

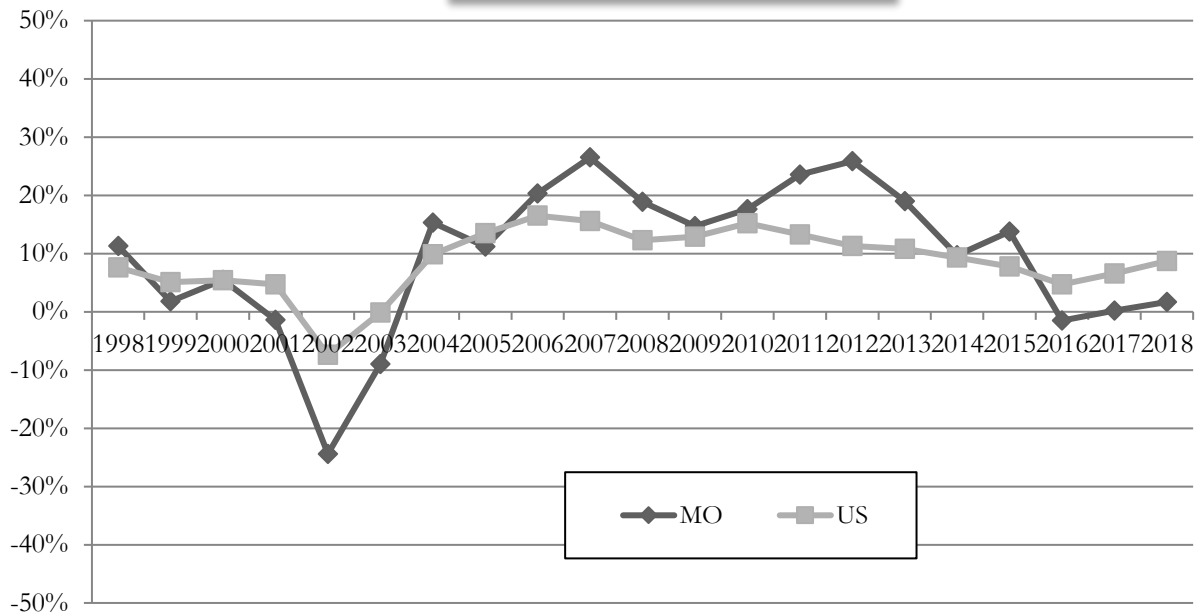
Year	Premium Earned	Direct Losses Incurred	Defense and Cost Containment Expenses	Other Expenses	Claims + Expenses	Profit on Insurance Transactions	Return on Net Worth
1993	\$115,261,205	54.6%	18.0%	17.2%	89.8%	28.1%	20.3%
1994	\$125,358,976	54.7%	25.6%	18.2%	98.5%	15.4%	12.9%
1995	\$128,910,099	50.9%	30.7%	18.0%	99.6%	16.0%	13.0%
1996	\$130,187,481	92.4%	35.6%	18.1%	146.4%	-11.9%	-1.5%
1997	\$114,373,044	48.4%	16.8%	18.9%	84.1%	30.9%	17.1%
1998	\$102,963,001	59.6%	25.2%	21.6%	106.4%	17.5%	11.3%
1999	\$106,235,829	72.5%	39.3%	23.1%	134.9%	-7.0%	1.8%
2000	\$108,481,154	69.4%	36.6%	22.2%	128.2%	1.5%	5.5%
2001	\$119,299,710	85.9%	30.6%	22.7%	139.2%	-10.7%	-1.4%
2002	\$183,287,756	112.2%	35.5%	19.8%	167.5%	-36.5%	-24.4%
2003	\$208,731,981	89.9%	38.6%	15.7%	144.2%	-18.2%	-9.0%
2004	\$243,395,277	52.0%	24.5%	13.8%	90.3%	17.1%	15.3%
2005	\$232,681,166	49.3%	34.9%	15.7%	99.9%	12.2%	11.2%
2006	\$240,333,213	30.3%	26.6%	18.6%	75.5%	28.9%	20.3%
2007	\$221,616,727	12.9%	17.5%	22.0%	52.4%	43.5%	26.5%
2008	\$210,448,610	18.3%	18.7%	24.5%	61.5%	30.0%	18.9%
2009	\$202,870,012	33.4%	17.9%	25.7%	77.0%	21.5%	14.7%
2010	\$191,884,450	27.3%	14.6%	28.5%	70.4%	28.8%	17.6%
2011	\$186,318,640	21.8%	16.8%	27.8%	66.4%	26.2%	25.1%
2012	\$164,784,580	13.0%	19.9%	28.6%	61.5%	36.1%	25.9%
2013	\$157,541,853	22.5%	11.7%	28.6%	62.8%	33.2%	19.0%
2014	\$145,215,577	31.9%	27.0%	30.8%	89.6%	15.1%	12.4%
2015	\$143,482,089	18.5%	25.0%	32.4%	75.9%	23.4%	18.3%
2016	\$142,371,449	65.3%	22.8%	34.9%	123.0%	-9.0%	-1.5%
2017	\$137,405,743	58.0%	30.6%	33.6%	122.2%	-6.4%	0.2%
2018	\$143,256,625	60.1%	20.7%	35.3%	116.1%	-1.8%	1.7%

*Source: NAIC, *Profitability by Line by State, 2018* produced by DIFP based on the NAIC profitability formula.

Profit on Insurance Transactions



Return on Net Worth



**Licensed Market
Medical Professional Liability
Data from the Financial Annual Statement**

Year	Premium Written	Losses Paid	Premium Earned	Losses Incurred	Defense & Cost Containment Expenses Incurred	Dividends	Commission & Brokerage Expense	Taxes & Fees
1998	\$81,825,564	\$70,662,769	\$88,726,009	\$48,377,778	\$19,040,801	\$1,295,442	\$5,388,405	\$2,007,299
1999	\$94,908,930	\$64,440,159	\$93,676,070	\$68,353,075	\$34,866,139	\$1,751,359	\$6,930,847	\$1,951,921
2000	\$92,838,702	\$63,822,268	\$91,969,349	\$65,056,683	\$29,395,964	\$1,765,029	\$6,036,540	\$2,232,929
2001	\$109,081,420	\$76,730,820	\$97,027,591	\$79,038,068	\$25,505,859	\$2,032,104	\$9,442,445	\$2,583,310
2002	\$171,916,338	\$108,669,530	\$156,106,363	\$167,928,367	\$43,358,216	\$2,026,706	\$13,265,133	\$4,307,119
2003	\$186,479,369	\$83,749,882	\$169,970,364	\$164,309,442	\$63,162,582	\$125,396	\$10,516,274	\$2,937,402
2004	\$205,581,129	\$110,138,156	\$202,933,058	\$100,898,891	\$45,574,802	\$115,005	\$12,195,515	\$2,748,213
2004	\$205,581,129	\$110,138,156	\$202,933,058	\$100,898,891	\$45,574,802	\$115,005	\$12,195,515	\$2,748,213
2006	\$189,392,764	\$71,311,677	\$191,945,067	\$64,755,502	\$54,460,185	\$6,917,834	\$12,008,414	\$2,300,687
2007	\$169,414,624	\$79,077,894	\$173,191,830	\$21,078,129	\$30,589,894	\$9,919,356	\$12,054,024	\$1,745,597
2008	\$164,271,453	\$52,799,665	\$167,197,841	\$26,633,904	\$30,723,882	\$12,650,632	\$11,734,877	\$1,954,845
2009	\$155,867,385	\$76,864,434	\$159,189,836	\$47,022,583	\$23,444,743	\$12,713,160	\$11,147,292	\$1,966,249
2010	\$145,448,052	\$44,688,166	\$145,360,026	\$44,309,036	\$17,175,262	\$17,876,034	\$10,177,819	\$1,537,348
2011	\$138,335,771	\$54,208,628	\$142,561,035	\$30,166,874	\$20,619,085	\$12,465,594	\$10,755,805	\$1,254,529
2012	\$129,221,773	\$39,892,506	\$131,629,362	\$12,976,307	\$24,519,084	\$12,141,309	\$9,898,117	\$1,576,914
2013	\$120,659,064	\$45,354,474	\$126,114,168	\$28,725,216	\$11,828,893	\$11,445,600	\$9,342,925	\$1,319,381
2014	\$118,842,690	\$51,180,712	\$117,930,969	\$33,554,372	\$25,692,833	\$12,526,211	\$8,651,706	\$1,820,539
2015	\$114,306,152	\$47,836,377	\$116,671,496	\$23,056,528	\$27,145,084	\$12,798,511	\$8,844,017	\$1,880,467
2016	\$113,635,101	\$46,853,477	\$113,293,453	\$64,361,816	\$15,369,598	\$13,532,563	\$8,867,237	\$2,945,972
2017	\$110,581,910	\$48,898,384	\$109,206,859	\$70,100,720	\$25,509,729	\$13,850,168	\$8,515,977	\$1,618,763
2018	\$110,447,806	\$58,635,151	\$111,473,769	\$53,257,813	\$13,615,485	\$15,169,324	\$8,719,723	\$1,847,287

Licensed Market Medical Professional Liability Data form the Financial Annual Statement					
	% or Written Premium	% of Earned Premium			
Year	Direct Losses Paid	Direct Losses Incurred	Defense & Cost Containment Expenses	Other Underwriting Expenses	Underwriting Results
1998	86.4%	54.5%	21.5%	9.8%	85.8%
1999	67.9%	73.0%	37.2%	11.4%	121.5%
2000	68.7%	70.7%	32.0%	10.9%	113.6%
2001	70.3%	81.5%	26.3%	14.5%	122.2%
2002	63.2%	107.6%	27.8%	12.6%	147.9%
2003	44.9%	96.7%	37.2%	8.0%	141.8%
2004	53.6%	49.7%	22.5%	7.4%	79.6%
2005	40.8%	46.0%	34.9%	7.8%	88.7%
2006	37.7%	33.7%	28.4%	11.1%	73.2%
2007	46.7%	12.2%	17.7%	13.7%	43.5%
2008	32.1%	15.9%	18.4%	15.8%	50.1%
2009	49.3%	29.5%	14.7%	16.2%	60.5%
2010	30.7%	30.5%	11.8%	20.4%	62.7%
2011	39.2%	21.2%	14.5%	17.2%	52.8%
2012	30.9%	9.9%	18.6%	17.9%	46.4%
2013	37.6%	22.8%	9.4%	17.5%	49.7%
2014	43.1%	28.5%	21.8%	19.5%	69.7%
2015	41.8%	19.8%	23.3%	20.2%	63.2%
2016	41.2%	56.8%	13.6%	22.4%	92.7%
2017	44.2%	64.2%	23.4%	22.0%	109.5%
2018	53.1%	47.8%	12.2%	23.1%	83.1%

Surplus Lines Market Medical Professional Liability Data form the Financial Annual Statement								
Year	Premium Written	Losses Paid	Premium Earned	Losses Incurred	Defense & Cost Containment Expenses Incurred	Dividends	Commission & Brokerage Expense	Taxes & Fees
1998	\$15,870,718	\$11,380,508	\$14,403,279	\$13,185,053	\$153,478	\$11,177	\$1,450,699	\$74,218
1999	\$10,010,000	\$6,409,396	\$12,559,760	\$8,669,845	\$1,978,069	\$25,337	\$1,061,021	\$104,292
2000	\$20,739,467	\$6,755,710	\$16,511,806	\$10,243,905	\$4,657,976	\$58,534	\$2,568,781	\$108,710
2001	\$24,602,498	\$10,015,312	\$22,272,120	\$23,432,287	\$4,958,791	\$43,698	\$2,398,572	\$149,059
2002	\$33,103,146	\$13,675,522	\$27,181,392	\$37,763,520	\$11,665,223	\$36,996	\$2,628,930	\$258,908
2003	\$40,481,669	\$9,841,245	\$38,761,618	\$25,388,834	\$7,648,244	\$0	\$2,511,248	\$525
2004	\$41,074,434	\$11,967,015	\$40,462,218	\$25,144,578	\$4,811,445	\$0	\$2,955,713	\$201,120
2004	\$41,074,434	\$11,967,015	\$40,462,218	\$25,144,578	\$4,811,445	\$0	\$2,955,713	\$201,120
2006	\$49,120,606	\$21,272,422	\$48,388,148	\$11,085,405	\$2,439,533	\$9,228	\$3,378,131	\$431,077
2007	\$47,184,656	\$11,301,841	\$48,424,897	\$8,415,924	\$5,701,835	\$200,498	\$3,599,954	\$309,966
2008	\$42,535,711	\$12,632,056	\$43,250,769	\$11,858,488	\$3,894,411	\$243,800	\$4,655,756	\$363,755
2009	\$46,890,108	\$26,507,125	\$43,878,085	\$47,985,264	\$51,261,811	\$510,763	\$4,052,908	\$323,852
2010	\$45,522,402	-\$4,315,363	\$46,471,296	-\$19,142,542	-\$43,332,592	\$970,054	\$3,651,213	\$337,354
2011	\$38,175,180	\$9,765,893	\$43,757,605	\$10,532,328	\$4,817,558	\$615,634	\$3,299,246	\$325,939
2012	\$32,177,497	\$16,175,954	\$33,155,218	\$8,190,662	\$4,263,427	\$730,557	\$2,821,852	\$272,281
2013	\$38,175,180	\$9,765,893	\$43,757,605	\$10,532,328	\$4,817,558	\$615,634	\$3,299,246	\$325,939
2014	\$25,598,079	\$16,945,127	\$27,284,608	\$12,767,670	\$7,126,991	\$778,917	\$2,477,782	\$222,097
2015	\$27,473,479	\$14,200,191	\$26,810,593	\$3,461,894	\$5,187,063	\$524,416	\$2,999,177	\$241,037
2016	\$29,570,516	\$17,696,029	\$29,077,996	\$28,608,485	\$5,877,708	\$753,287	\$3,603,085	\$264,828
2017	\$30,612,399	\$15,421,747	\$28,198,884	\$9,660,617	\$8,680,400	\$779,163	\$3,892,186	\$222,163
2018	\$34,757,355	\$31,564,269	\$31,815,905	\$32,877,443	\$4,215,241	\$573,256	\$5,411,507	\$381,899

Surplus Lines Market Medical Professional Liability Data form the Financial Annual Statement					
% of Written Premium		% of Earned Premium			
Year	Direct Losses Paid	Direct Losses Incurred	Defense & Cost Containment Expenses Incurred	Other Underwriting Expenses	Underwriting Results
1998	71.7%	91.5%	1.1%	10.7%	103.3%
1999	64.0%	69.0%	15.7%	9.5%	94.3%
2000	32.6%	62.0%	28.2%	16.6%	106.8%
2001	40.7%	105.2%	22.3%	11.6%	139.1%
2002	41.3%	138.9%	42.9%	10.8%	192.6%
2003	24.3%	65.5%	19.7%	6.5%	91.7%
2004	29.1%	62.1%	11.9%	7.8%	81.8%
2004	29.1%	62.1%	11.9%	7.8%	81.8%
2006	43.3%	22.9%	5.0%	7.9%	35.8%
2007	24.0%	17.4%	11.8%	8.5%	37.6%
2008	29.7%	27.4%	9.0%	12.2%	48.6%
2009	56.5%	109.4%	116.8%	11.1%	237.3%
2010	-9.5%	-41.2%	-93.2%	10.7%	-123.8%
2011	25.6%	24.1%	11.0%	9.7%	44.8%
2012	50.3%	24.7%	12.9%	11.5%	49.1%
2013	25.6%	24.1%	11.0%	9.7%	44.8%
2014	66.2%	46.8%	26.1%	12.8%	85.7%
2015	51.7%	12.9%	19.3%	14.0%	46.3%
2016	59.8%	98.4%	20.2%	15.9%	134.5%
2017	50.4%	34.3%	30.8%	17.4%	82.4%
2018	90.8%	103.3%	13.2%	20.0%	136.6%

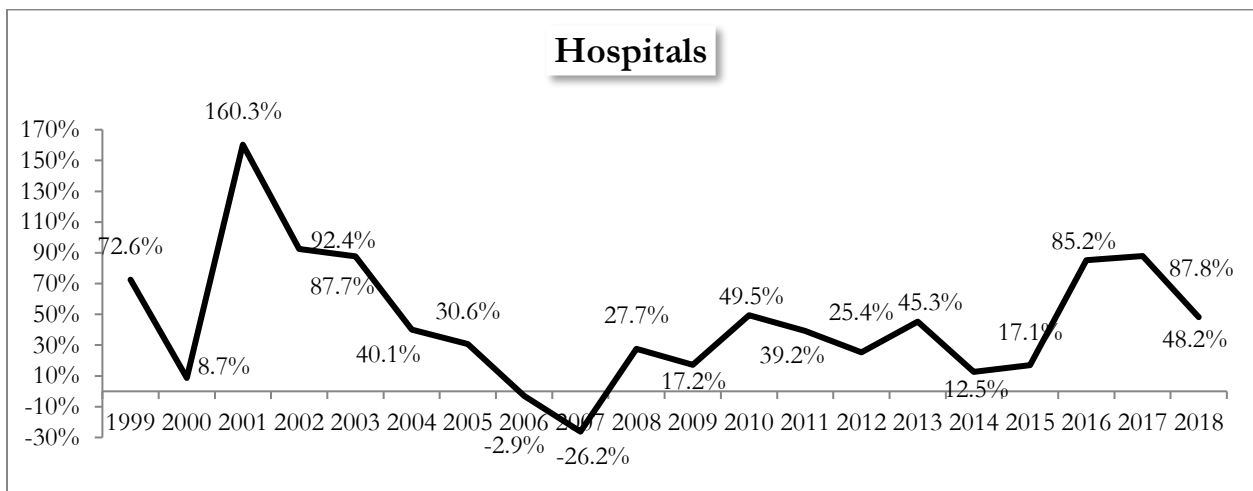
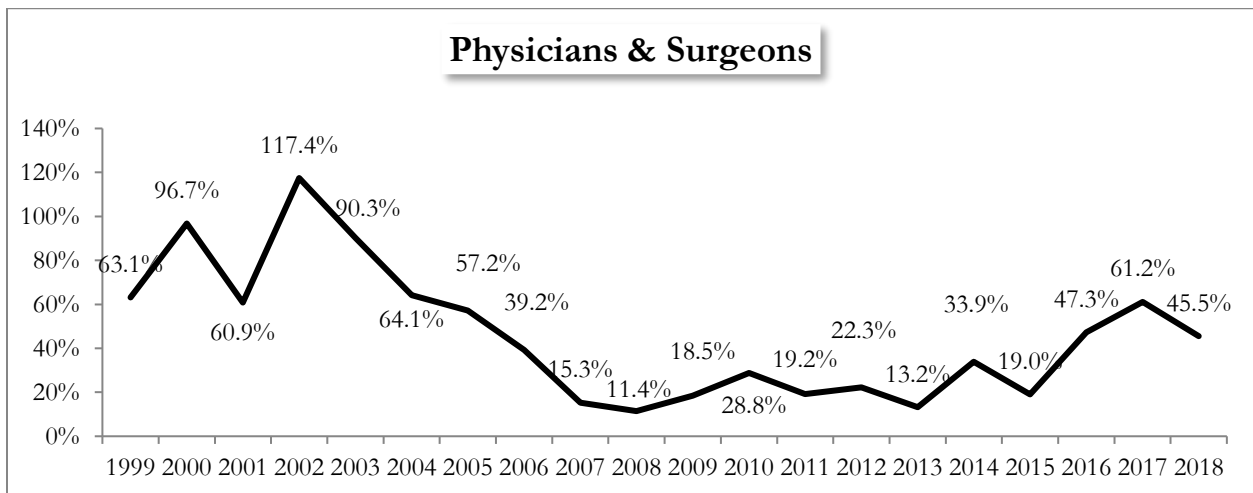
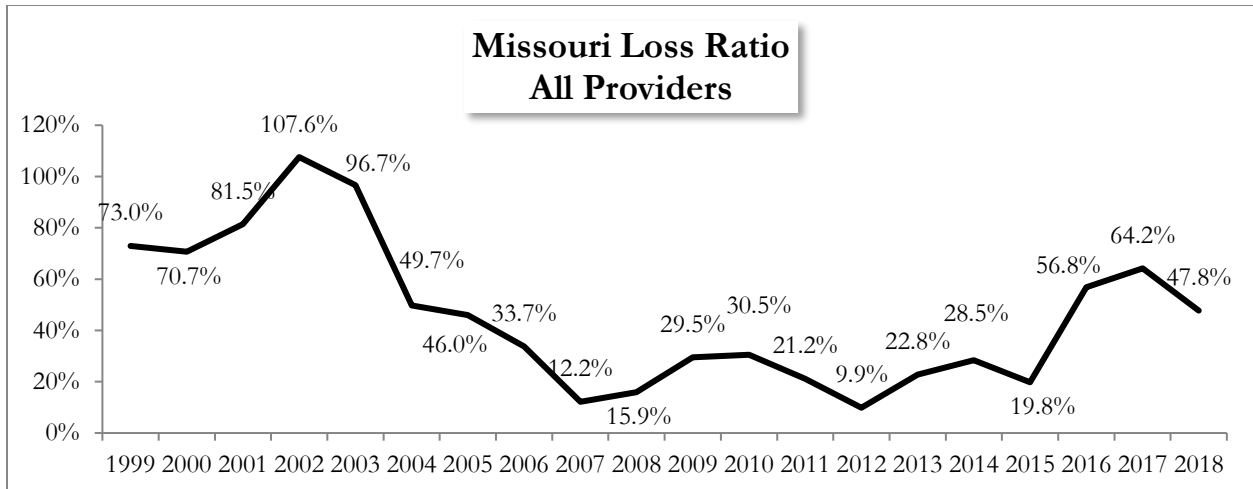
Licensed Medical Professional Liability Market – Physicians & Surgeons							
Year	Direct Premium Written	Direct Losses Paid	Cash Flow Loss Ratio	Direct Premium Earned	Direct Losses Incurred	Loss Ratio	% Change in Direct Written Premium
1997	\$62,780,784	\$44,893,158	71.5%	\$63,904,882	\$39,240,977	61.4%	
1998	\$55,760,257	\$50,609,999	90.8%	\$57,215,107	\$45,501,593	79.5%	-11.2%
1999	\$64,853,222	\$43,998,372	67.8%	\$63,998,070	\$40,408,719	63.1%	16.3%
2000	\$61,518,461	\$46,389,410	75.4%	\$62,776,133	\$60,727,760	96.7%	-5.1%
2001	\$77,092,452	\$53,869,948	69.9%	\$67,579,007	\$41,141,286	60.9%	25.3%
2002	\$114,887,033	\$79,431,185	69.1%	\$104,672,745	\$122,930,348	117.4%	49.0%
2003	\$136,418,623	\$52,870,665	38.8%	\$121,324,955	\$109,538,169	90.3%	18.7%
2004	\$142,627,100	\$81,076,868	56.9%	\$142,262,082	\$91,237,441	64.1%	4.6%
2005	\$133,799,432	\$49,802,894	37.2%	\$134,869,365	\$77,185,727	57.2%	-6.2%
2006	\$133,792,923	\$60,700,054	45.4%	\$134,958,248	\$52,960,943	39.2%	0.0%
2007	\$125,881,868	\$53,940,208	42.9%	\$128,191,866	\$19,554,674	15.3%	-5.9%
2008	\$120,777,660	\$41,025,516	34.0%	\$123,366,930	\$14,102,358	11.4%	-4.1%
2009	\$116,573,724	\$45,905,797	39.4%	\$118,482,242	\$21,899,600	18.5%	-3.5%
2010	\$106,905,417	\$31,565,514	29.5%	\$106,166,291	\$30,573,532	28.8%	-8.3%
2011	\$100,511,107	\$36,323,679	36.1%	\$104,503,104	\$20,097,063	19.2%	-6.0%
2012	\$90,030,972	\$29,093,806	32.3%	\$92,044,066	\$20,512,799	22.3%	-10.4%
2013	\$87,488,292	\$32,178,191	36.8%	\$99,226,970	\$13,132,287	13.2%	-2.8%
2014	\$79,013,127	\$36,940,432	46.8%	\$78,298,966	\$26,991,745	34.5%	-9.7%
2015	\$75,011,759	\$34,298,618	45.7%	\$76,626,408	\$14,585,676	19.0%	-5.1%
2016	\$71,283,262	\$26,484,714	37.2%	\$72,308,015	\$34,206,657	47.3%	-5.0%
2017	\$67,940,489	\$24,326,023	35.8%	\$66,673,811	\$40,774,941	61.2%	-4.7%
2018	\$65,596,340	\$35,664,803	54.37%	\$66,811,659	\$30,431,804	45.5%	-3.5%

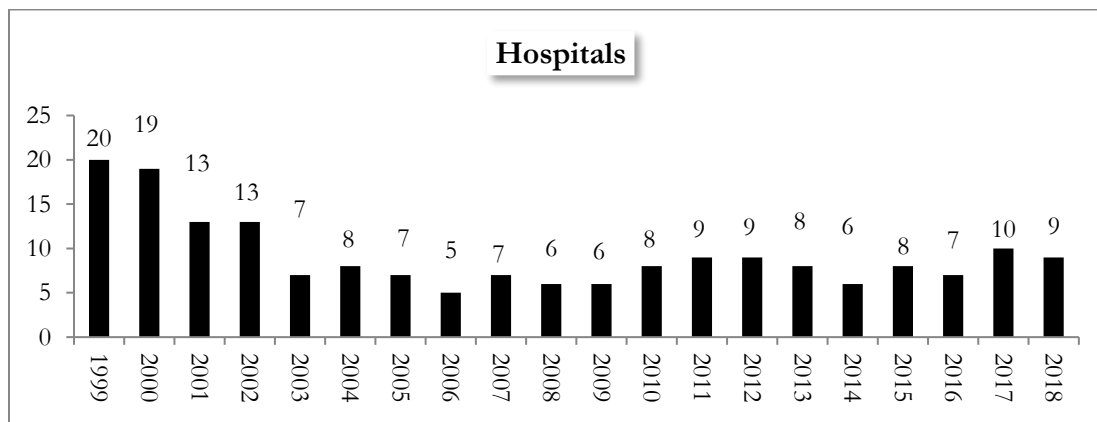
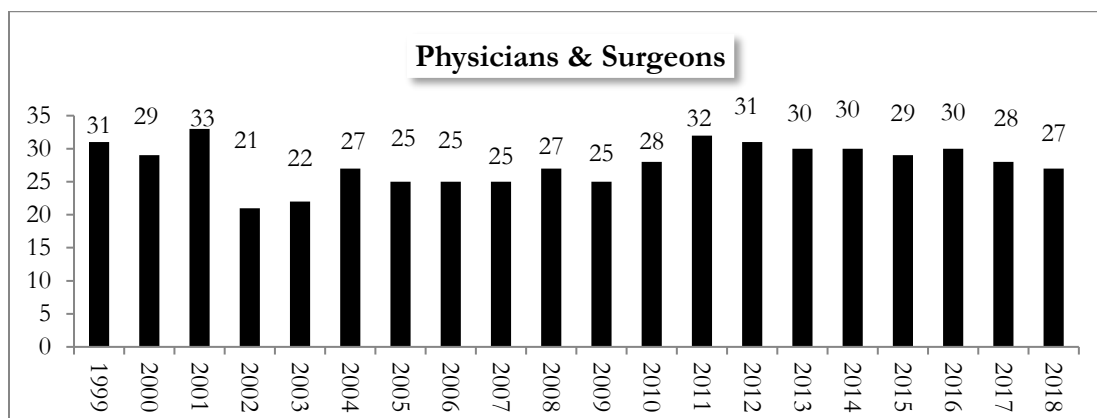
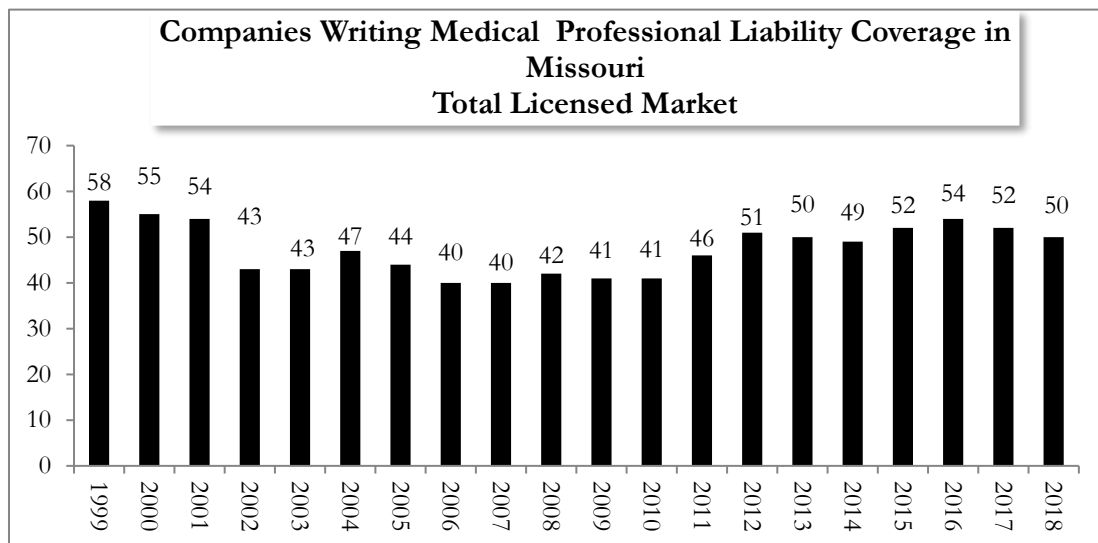
Licensed Medical Professional Liability Market - Dentists							
Year	Direct Premium Written	Direct Losses Paid	Cash Flow Loss Ratio	Direct Premium Earned	Direct Losses Incurred	Loss Ratio	% Change in Direct Written Premium
1997	\$3,620,053	\$1,506,555	41.6%	\$3,729,611	\$1,683,415	45.1%	
1998	\$3,387,756	\$1,454,934	43.0%	\$3,310,636	\$567,272	17.1%	-6.4%
1999	\$2,920,816	\$683,189	23.4%	\$3,164,122	-\$638,500	-20.2%	-13.8%
2000	\$3,232,321	\$696,834	21.6%	\$2,724,126	\$313,442	11.5%	10.7%
2001	\$3,686,464	\$302,962	8.2%	\$3,308,117	\$1,150,895	34.8%	14.1%
2002	\$4,458,209	\$2,443,938	54.8%	\$4,336,659	\$3,014,033	69.5%	20.9%
2003	\$6,830,040	\$1,457,855	21.3%	\$6,462,928	-\$630,815	-9.8%	53.2%
2004	\$4,439,569	\$347,940	7.8%	\$4,635,168	-\$1,642,942	-35.4%	-35.0%
2005	\$4,870,943	\$809,022	16.6%	\$4,801,966	\$1,195,919	24.9%	9.7%
2006	\$4,765,149	\$887,696	18.6%	\$4,877,298	\$951,891	19.5%	-2.2%
2007	\$4,704,136	\$589,929	12.5%	\$4,707,542	\$3,886,234	82.6%	-1.3%
2008	\$5,499,407	\$946,223	17.2%	\$5,429,154	\$3,638,721	67.0%	16.9%
2009	\$4,623,630	\$1,864,476	40.3%	\$4,723,201	\$3,445,027	72.9%	-15.9%
2010	\$4,285,875	\$774,347	18.1%	\$4,173,126	\$2,563,010	61.4%	-7.3%
2011	\$4,582,465	\$736,805	16.1%	\$4,660,048	-\$2,064,230	-44.3%	6.9%
2012	\$3,992,620	\$371,931	9.3%	\$4,040,694	-\$3,430,038	-84.9%	-12.9%
2013	\$3,924,335	\$1,886,131	48.1%	\$4,064,301	\$2,394,279	58.9%	-1.7%
2014	\$3,705,444	\$427,504	11.5%	\$3,226,524	-\$229,235	-7.1%	-5.6%
2015	\$4,094,802	\$1,432,031	35.0%	\$4,142,222	\$1,534,063	37.0%	10.5%
2016	\$4,089,461	\$352,294	8.6%	\$4,110,217	\$4,001,382	97.4%	-0.1%
2017	\$3,824,206	\$493,101	12.9%	\$3,591,286	-\$783,451	-21.8%	-6.5%
2018	\$4,089,319	\$193,303	4.7%	\$5,061,792	-\$153,116	-3.0%	6.9%

Licensed Medical Professional Liability Market - Nurses							
Year	Direct Premium Written	Direct Losses Paid	Cash Flow Loss Ratio	Direct Premium Earned	Direct Losses Incurred	Loss Ratio	% Change in Direct Written Premium
1997	\$1,430,588	\$29,794	2.1%	\$1,073,768	-\$580,638	-54.1%	
1998	\$518,436	\$15,750	3.0%	\$685,261	\$145,484	21.2%	-63.8%
1999	\$701,196	\$277,500	39.6%	\$795,615	\$275,506	34.6%	35.3%
2000	\$492,661	\$999	0.2%	\$419,531	\$933,815	222.6%	-29.7%
2001	\$541,382	\$795,000	146.8%	\$515,088	\$159,655	31.0%	9.9%
2002	\$520,559	\$1,250	0.2%	\$644,834	-\$475,689	-73.8%	-3.8%
2003	\$535,407	\$0	0.0%	\$519,272	\$57,165	11.0%	2.9%
2004	\$581,243	\$345,000	59.4%	\$585,759	\$490,327	83.7%	8.6%
2005	\$413,075	\$0	0.0%	\$432,944	-\$8,469	-2.0%	-28.9%
2006	\$421,601	\$0	0.0%	\$458,201	-\$12,376	-2.7%	2.1%
2007	\$415,168	\$0	0.0%	\$422,461	\$65,415	15.5%	-1.5%
2008	\$1,989,794	\$418	0.0%	\$327,923	-\$31,573	-9.6%	379.3%
2009	\$309,742	\$0	0.0%	\$317,317	\$207,009	65.2%	-84.4%
2010	\$1,711,669	\$522,115	30.5%	\$1,760,654	\$1,062,764	60.4%	452.6%
2011	\$1,734,788	\$156,067	9.0%	\$1,733,699	\$368,452	21.3%	1.4%
2012	\$373,509	\$11,660	3.1%	\$372,591	\$80,779	21.7%	-78.5%
2013	\$2,069,756	\$1,630,000	78.8%	\$1,921,284	-\$768,534	-40.0%	454.1%
2014	\$1,899,970	\$1,105,000	58.2%	\$1,813,223	\$1,520,063	83.8%	-8.2%
2015	\$1,790,147	\$500,000	27.9%	\$1,950,459	-\$578,037	29.6%	-5.8%
2016	\$2,058,911	\$170,000	8.3%	\$1,998,258	\$385,652	19.3%	15.0%
2017	\$2,086,414	\$319,730	15.3%	\$2,121,115	\$383,267	18.1%	1.3%
2018	\$1,602,926	\$1,860,303	116.1%	\$909,867	\$1,105,821	121.5%	-23.2%

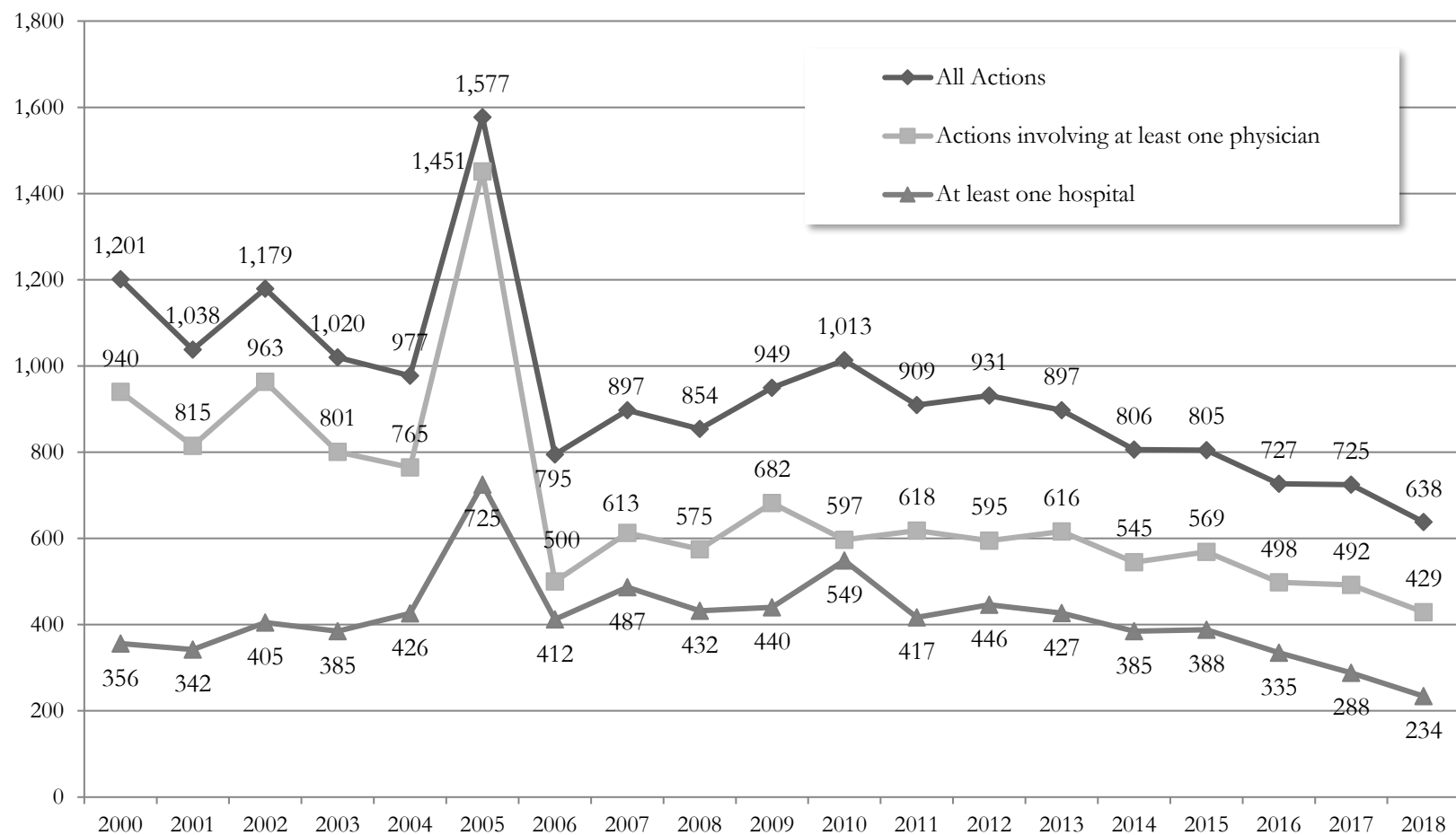
Licensed Medical Professional Liability Market - Hospitals							
Year	Direct Premium Written	Direct Losses Paid	Cash Flow Loss Ratio	Direct Premium Earned	Direct Losses Incurred	Loss Ratio	% Change in Direct Written Premium
1997	\$15,248,580	\$3,143,280	20.6%	\$13,199,320	\$1,974,721	15.0%	
1998	\$12,555,794	\$8,428,222	67.1%	\$14,604,144	\$2,875,637	19.7%	-17.7%
1999	\$16,948,592	\$12,870,063	75.9%	\$17,606,187	\$12,774,561	72.6%	35.0%
2000	\$29,795,347	\$12,437,665	41.7%	\$28,200,480	\$2,462,571	8.7%	75.8%
2001	\$17,016,926	\$12,078,108	71.0%	\$16,318,434	\$26,157,360	160.3%	-42.9%
2002	\$34,124,626	\$19,174,786	56.2%	\$29,340,028	\$27,119,153	92.4%	100.5%
2003	\$31,902,636	\$19,299,000	60.5%	\$27,781,676	\$24,359,179	87.7%	-6.5%
2004	\$47,899,466	\$20,485,670	42.8%	\$44,450,629	\$17,843,473	40.1%	50.1%
2005	\$42,269,475	\$8,873,832	21.0%	\$42,048,640	\$12,887,534	30.6%	-11.8%
2006	\$41,885,262	\$9,486,946	22.6%	\$42,430,660	-\$1,215,062	-2.9%	-0.9%
2007	\$28,947,064	\$18,854,499	65.1%	\$30,601,130	-\$8,009,803	-26.2%	-30.9%
2008	\$29,485,159	\$8,780,442	29.8%	\$29,598,095	\$8,197,263	27.7%	1.9%
2009	\$26,500,843	\$12,910,677	48.7%	\$27,951,125	\$4,797,557	17.2%	-10.1%
2010	\$26,921,014	\$10,839,530	40.3%	\$27,263,494	\$13,497,973	49.5%	1.6%
2011	\$26,326,999	\$15,185,561	57.7%	\$26,472,722	\$10,375,129	39.2%	-2.2%
2012	\$26,758,217	\$8,158,460	30.5%	\$27,024,112	\$6,868,410	25.4%	1.6%
2013	\$27,260,542	\$8,753,308	32.1%	\$27,008,248	\$12,224,931	45.3%	1.9%
2014	\$28,011,464	\$8,456,987	30.2%	\$27,930,444	\$3,501,381	12.5%	2.8%
2015	\$26,720,496	\$8,514,950	31.9%	\$27,278,471	\$4,664,529	17.1%	-4.6%
2016	\$28,327,347	\$17,429,362	61.5%	\$27,266,161	\$23,232,734	85.2%	6.0%
2017	\$29,029,936	\$20,467,000	70.5%	\$29,041,237	\$25,501,445	87.8%	2.5%
2018	\$30,861,668	\$16,676,086	54.0%	\$29,762,374	\$14,331,535	48.2%	6.3%

Licensed Medical Professional Liability Market - Other							
Year	Direct Premium Written	Direct Losses Paid	Cash Flow Loss Ratio	Direct Premium Earned	Direct Losses Incurred	Loss Ratio	% Change in Direct Written Premium
1997	\$18,770,001	\$5,714,900	30.4%	\$20,016,056	\$11,955,336	59.7%	
1998	\$9,437,033	\$10,145,048	107.5%	\$12,744,574	-\$904,059	-7.1%	-49.7%
1999	\$9,485,104	\$6,145,886	64.8%	\$8,112,075	\$15,532,787	191.5%	0.5%
2000	-\$2,200,088	\$4,297,362	-195.3%	-\$2,150,922	\$619,095	-28.8%	-123.2%
2001	\$10,744,197	\$9,684,802	90.1%	\$9,306,944	\$10,417,873	111.9%	-588.4%
2002	\$17,925,911	\$7,618,371	42.5%	\$17,112,098	\$15,340,524	89.6%	66.8%
2003	\$10,792,663	\$10,122,365	93.8%	\$13,881,532	\$30,985,744	223.2%	-39.8%
2004	\$10,033,751	\$7,882,678	78.6%	\$10,999,421	-\$7,029,405	-63.9%	-7.0%
2005	\$8,679,953	\$18,094,146	208.5%	\$10,229,416	-\$2,703,356	-26.4%	-13.5%
2006	\$8,527,828	\$236,981	2.8%	\$9,220,658	\$12,070,111	130.9%	-1.8%
2007	\$9,466,389	\$5,693,259	60.1%	\$9,268,831	\$5,581,593	60.2%	11.0%
2008	\$6,519,432	\$2,047,065	31.4%	\$8,475,741	\$727,137	8.6%	-31.1%
2009	\$7,859,446	\$16,183,484	205.9%	\$7,715,954	\$16,673,398	216.1%	20.6%
2010	\$5,624,077	\$986,659	17.5%	\$5,996,463	-\$3,388,244	-56.5%	-28.4%
2011	\$5,180,412	\$1,806,516	34.9%	\$5,191,464	\$1,390,461	26.8%	-7.9%
2012	\$8,066,454	\$2,256,649	28.0%	\$8,147,900	\$804,596	9.9%	55.7%
2013	\$5,270,323	\$1,674,312	31.8%	\$5,440,610	\$1,731,188	31.8%	-34.7%
2014	\$6,212,685	\$4,270,790	68.7%	\$6,661,814	\$2,214,418	33.2%	17.9%
2015	\$6,688,948	\$3,090,778	46.2%	\$6,673,937	\$2,850,289	42.7%	7.7%
2016	\$7,876,120	\$2,417,106	30.7%	\$7,610,797	\$2,535,391	33.3%	17.7%
2017	\$7,700,865	\$3,292,531	42.8%	\$7,779,410	\$4,224,513	54.3%	-2.2%
2018	\$8,297,553	\$4,240,657	51.1%	\$8,928,073	\$7,541,770	84.5%	7.7%

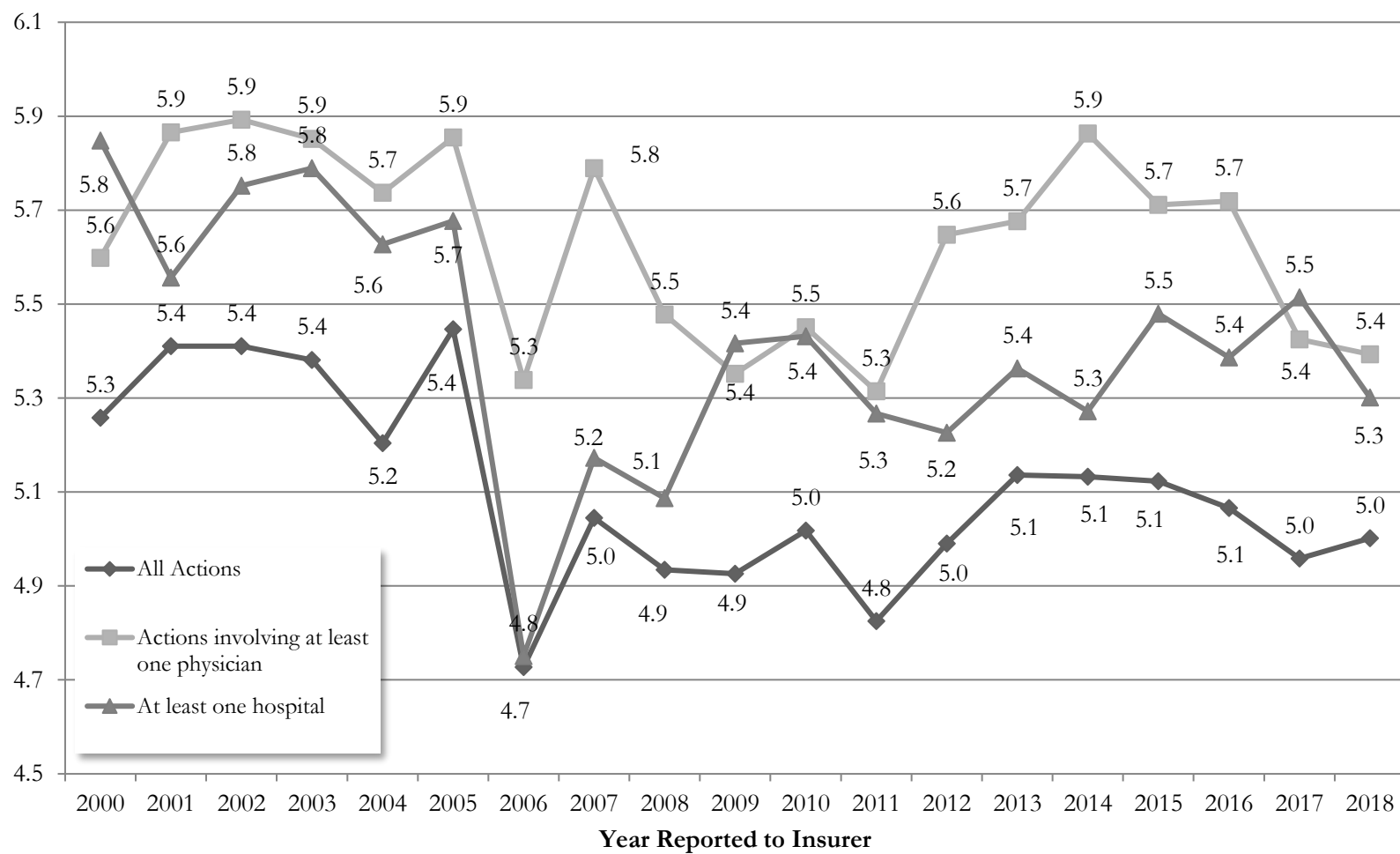




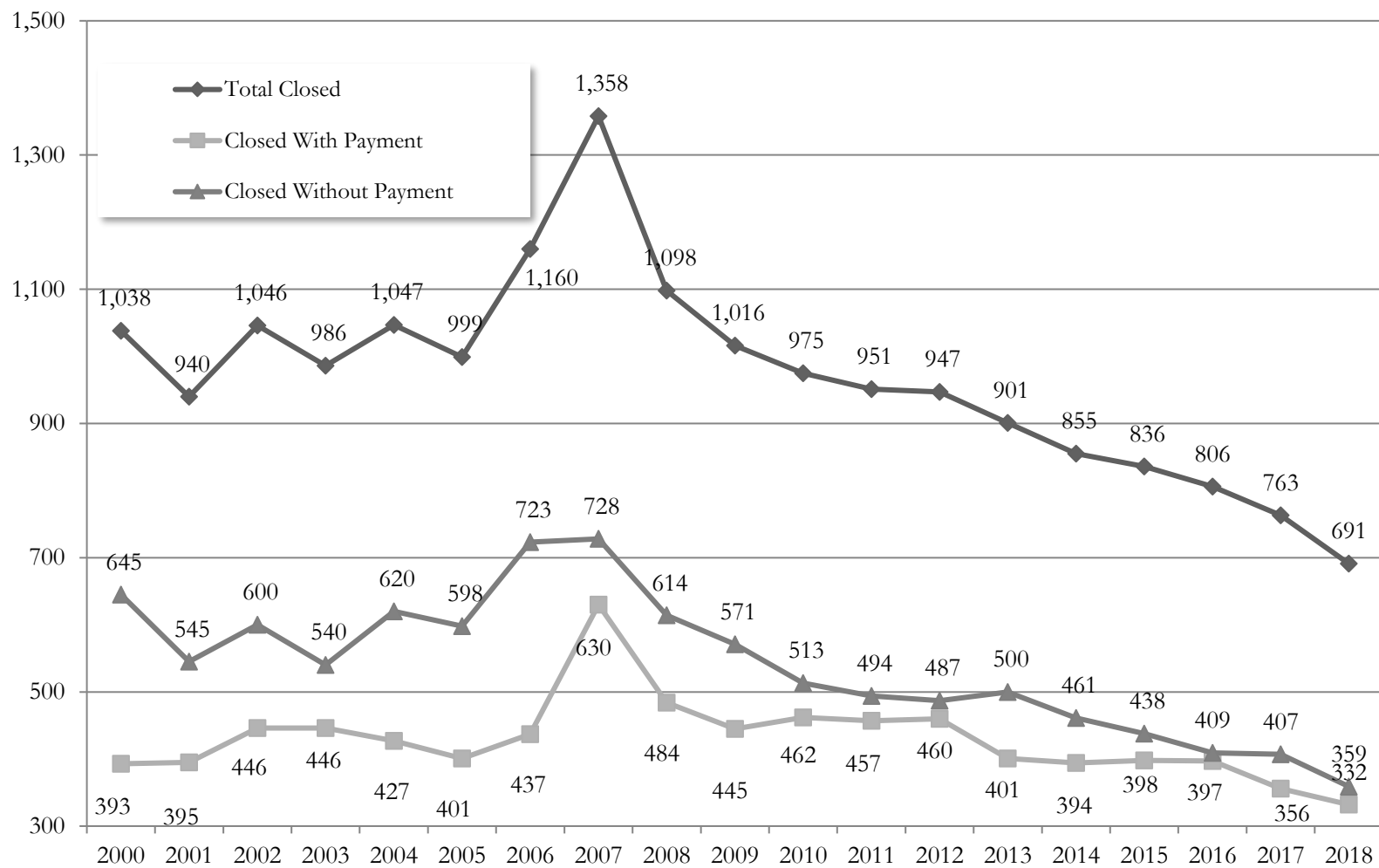
Number of Individuals Bringing Actions During Year



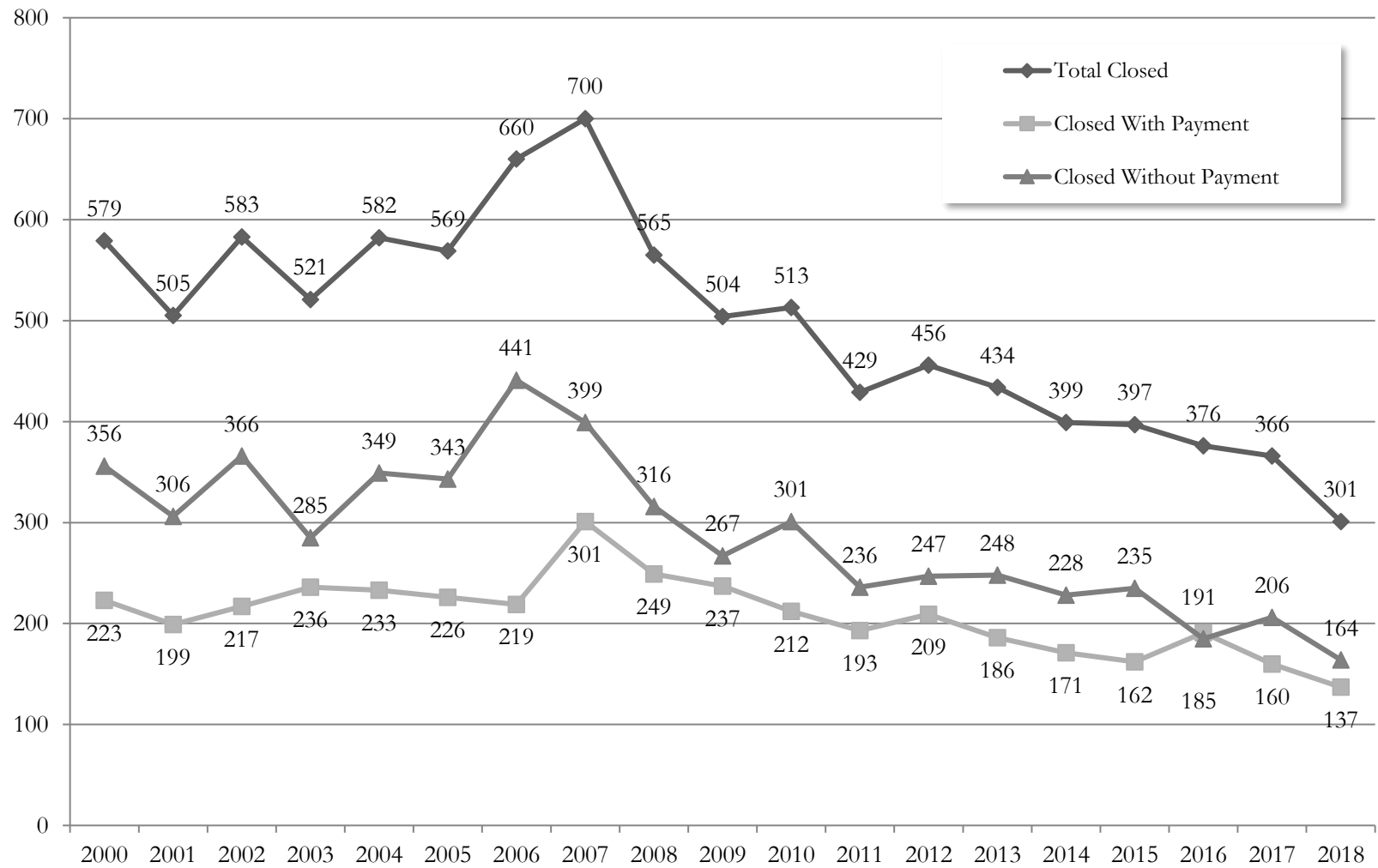
Average Injury Severity Scale 1 - 9



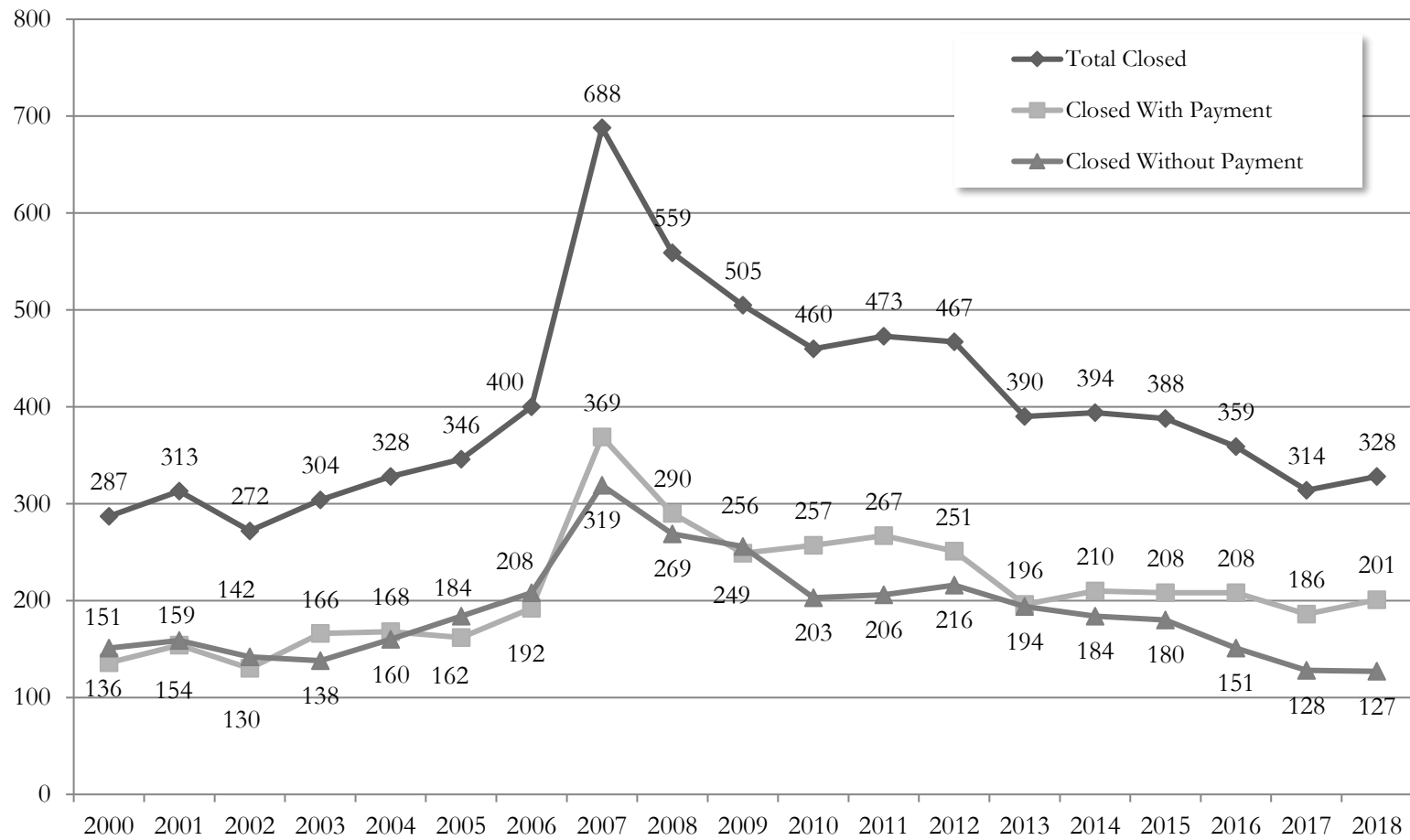
Closed Medical Liability Actions

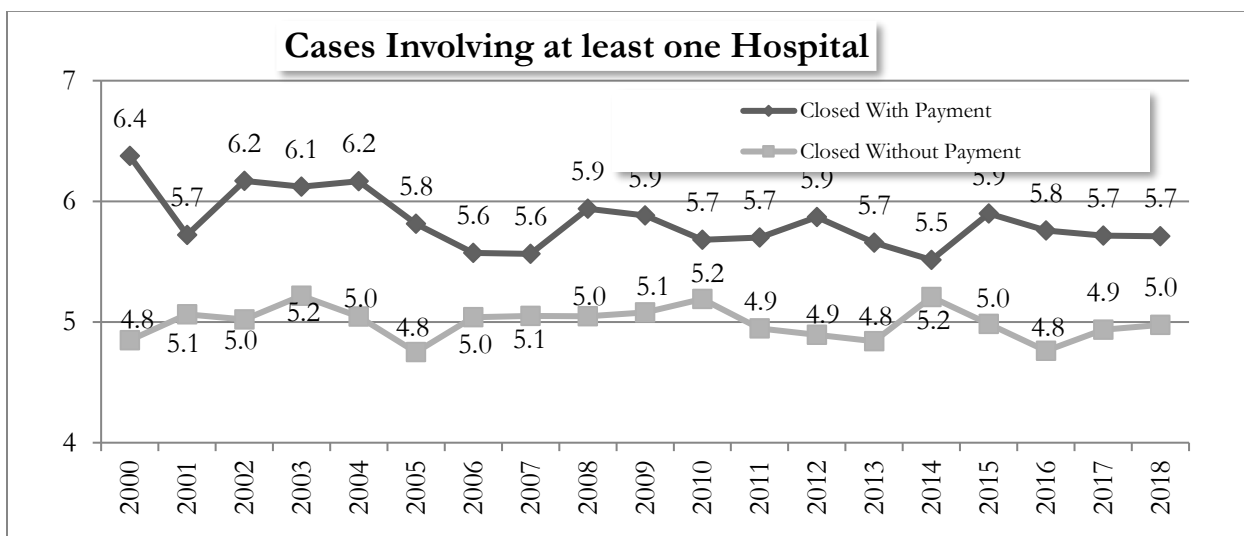
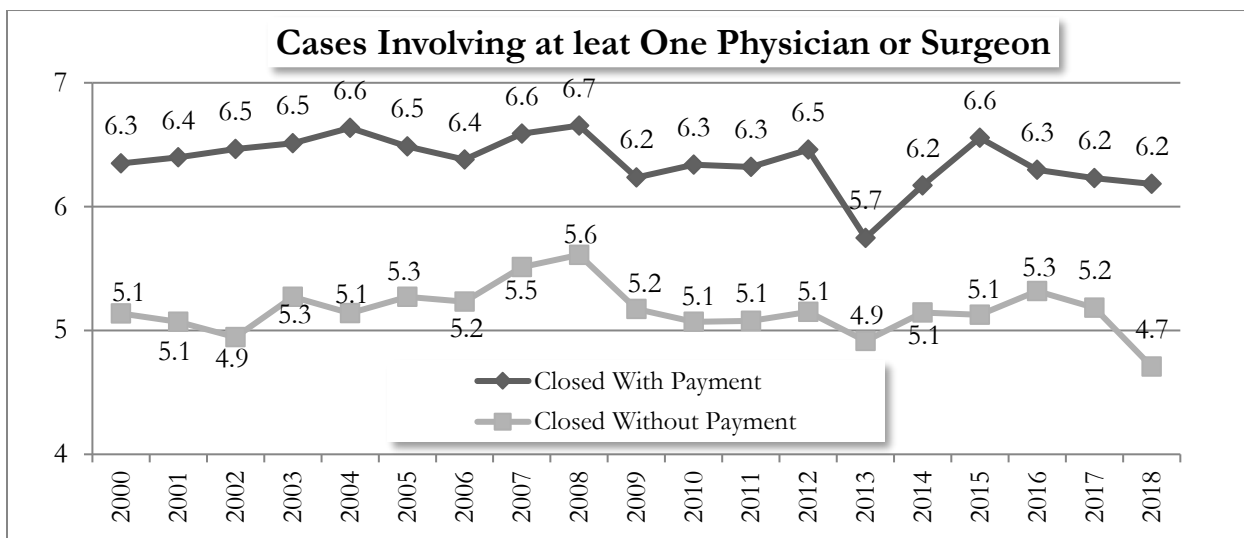
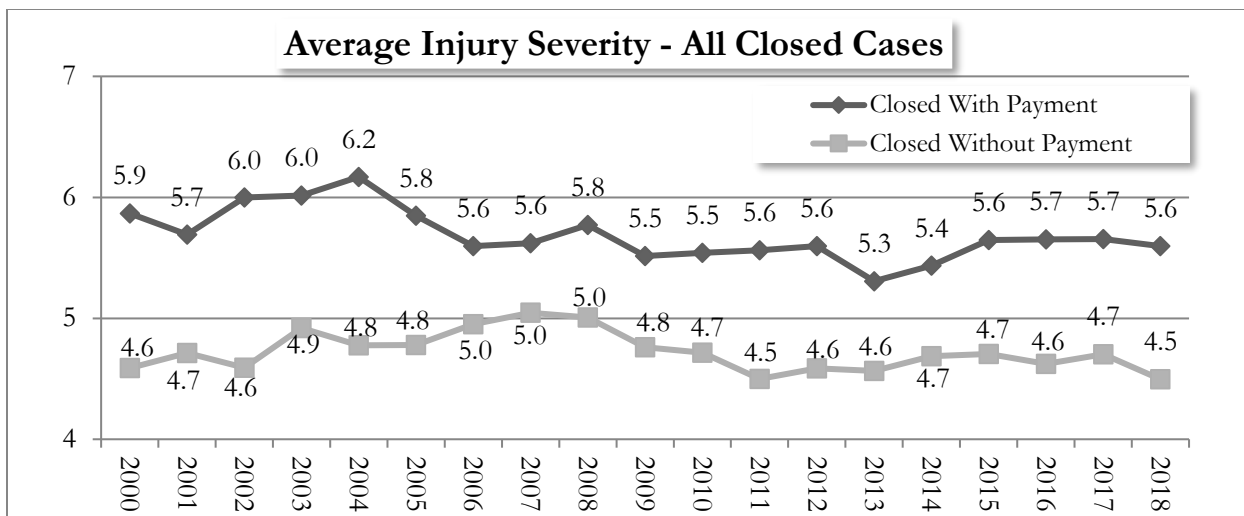


Closed Cases Involving at least one Physician

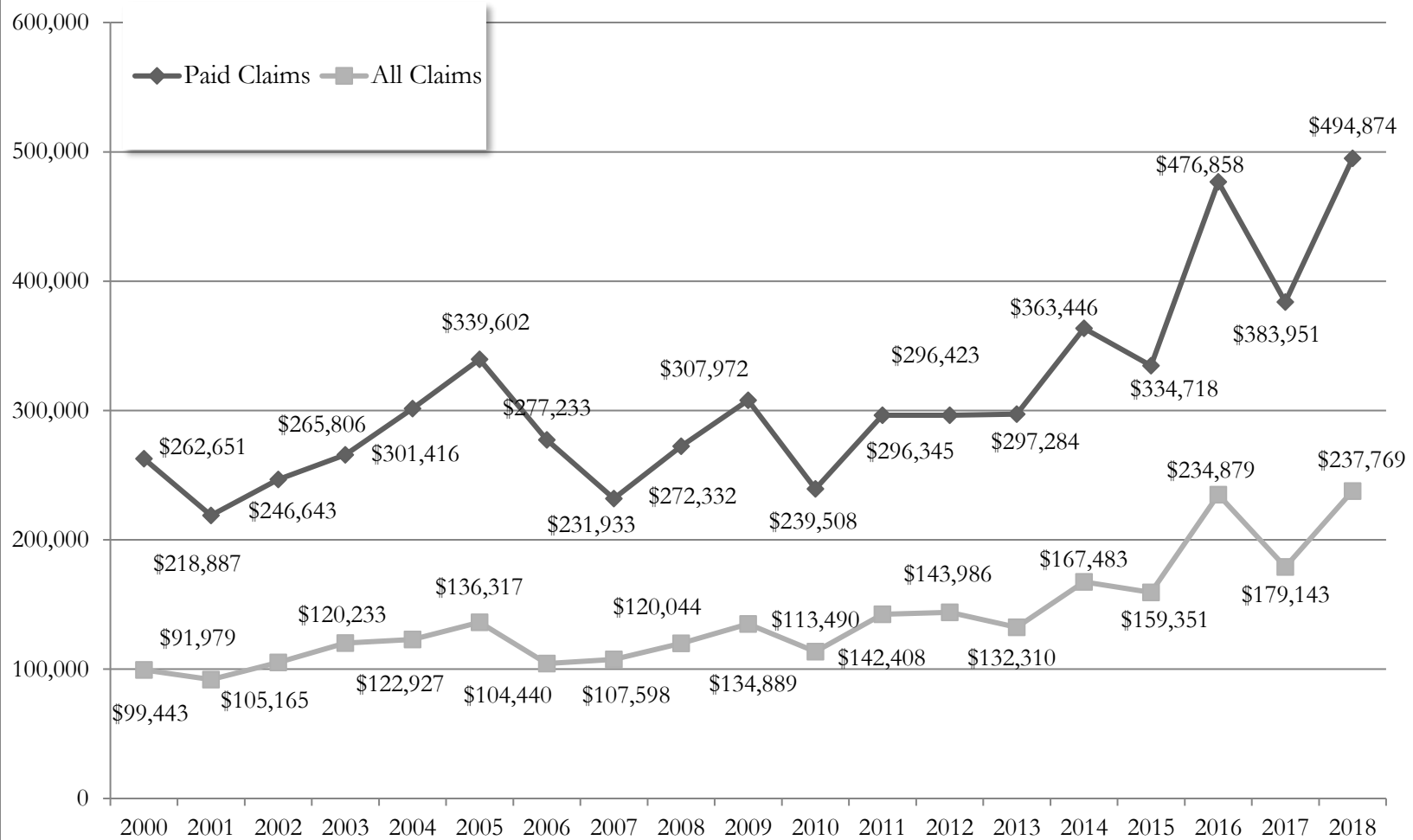


Closed Cases Involving at least One Hospital

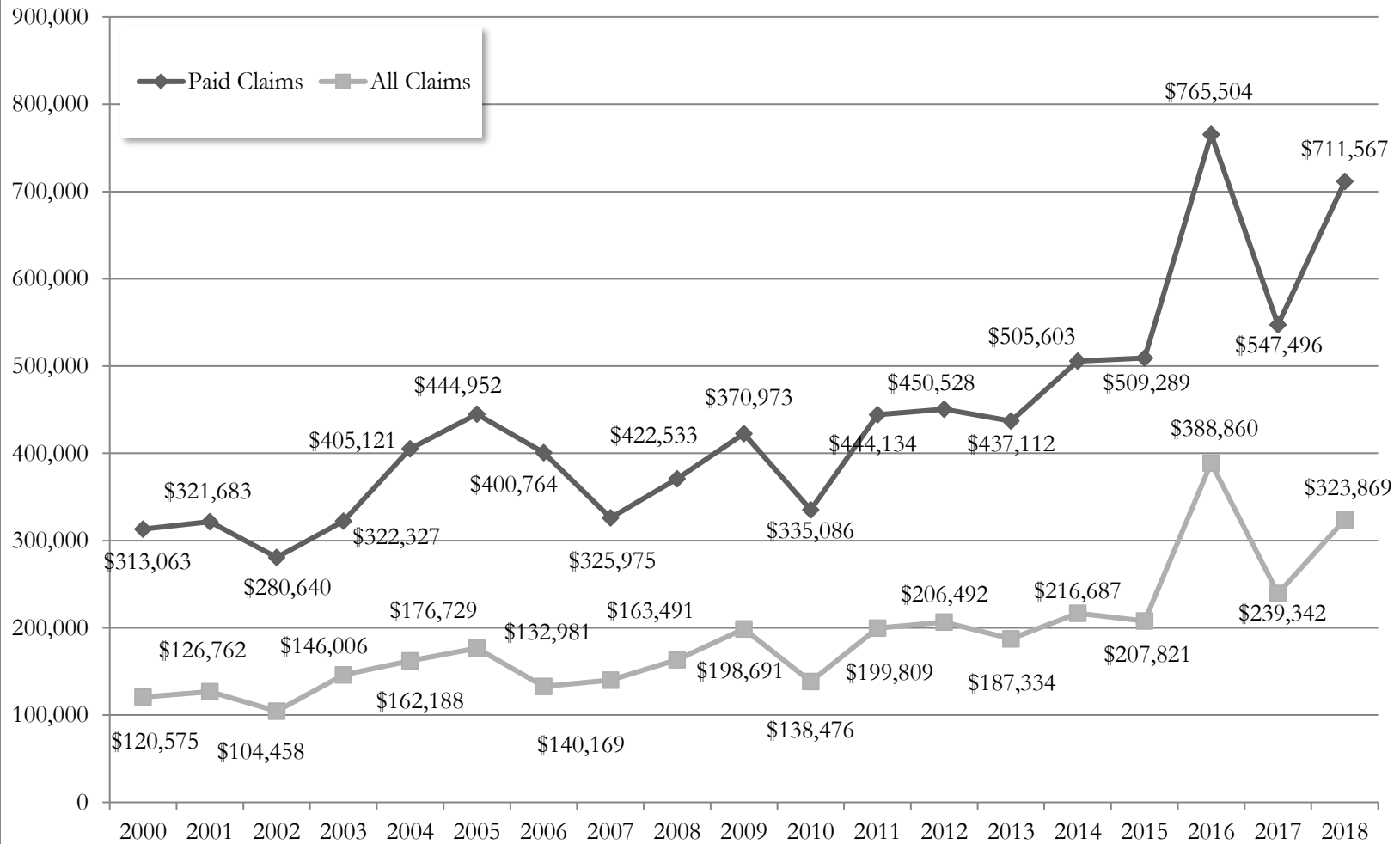




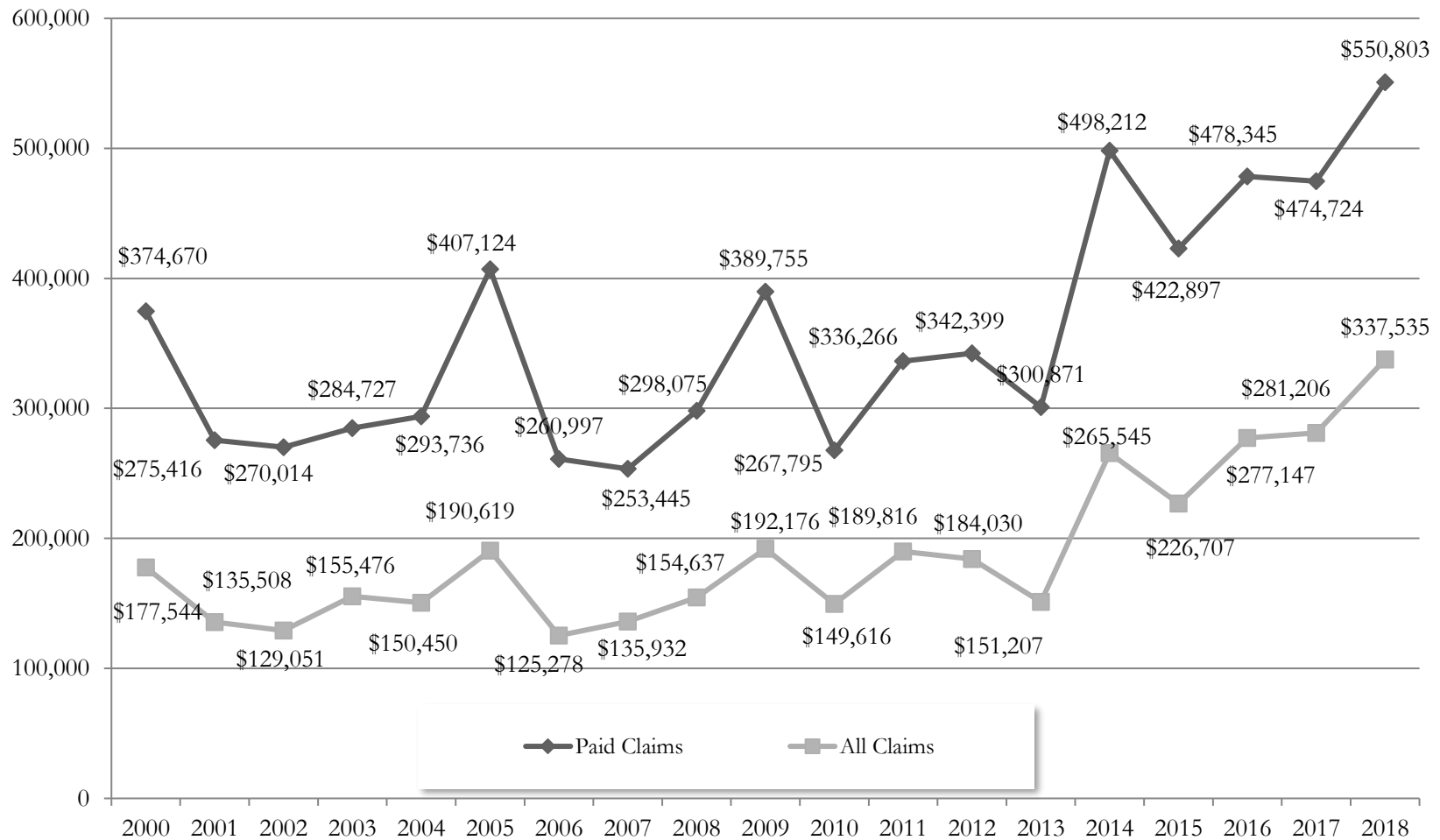
Average Indemnity Paid All Closed Cases



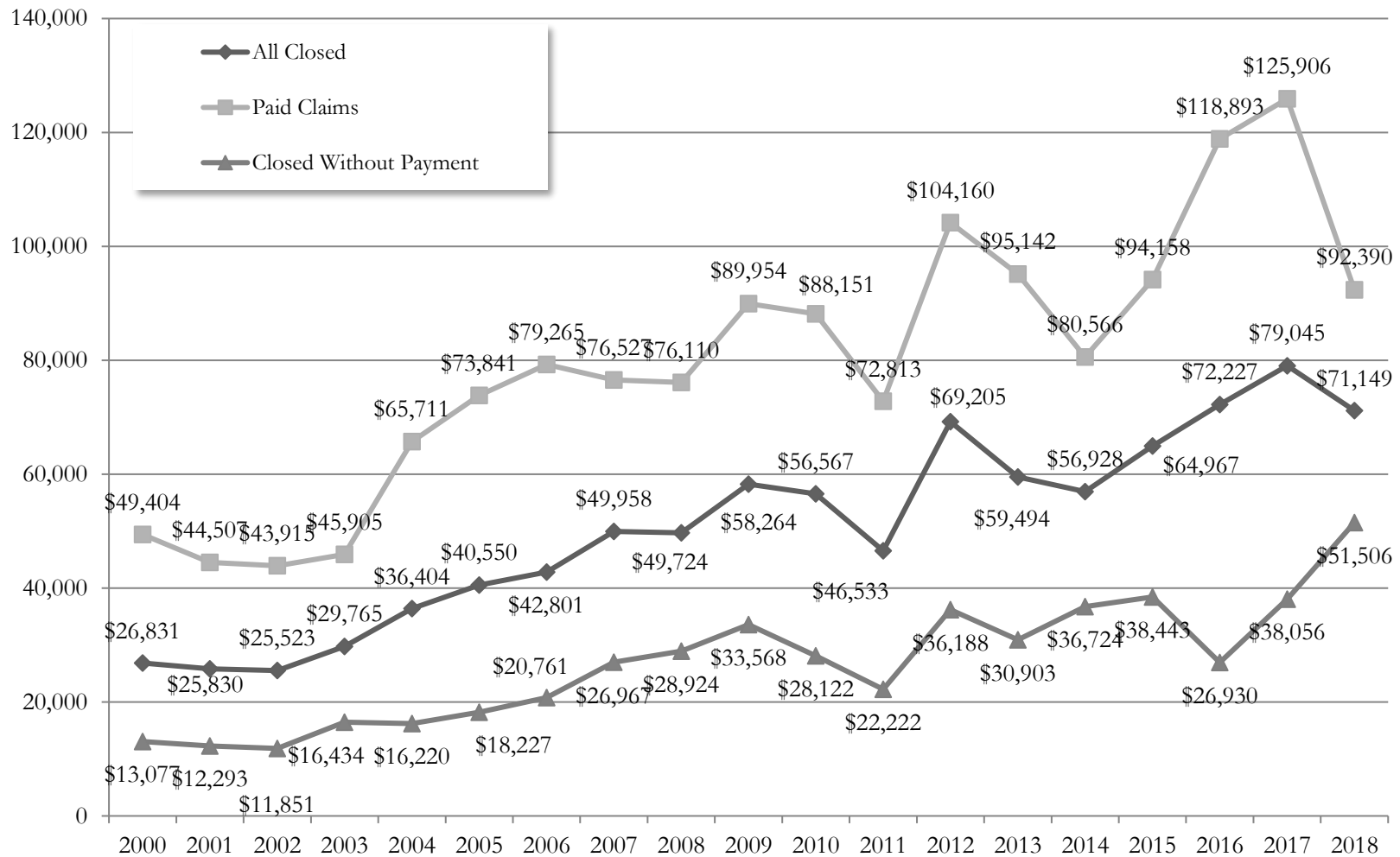
Average Indemnity Paid - Cases Involving at least One Physician or Surgeon



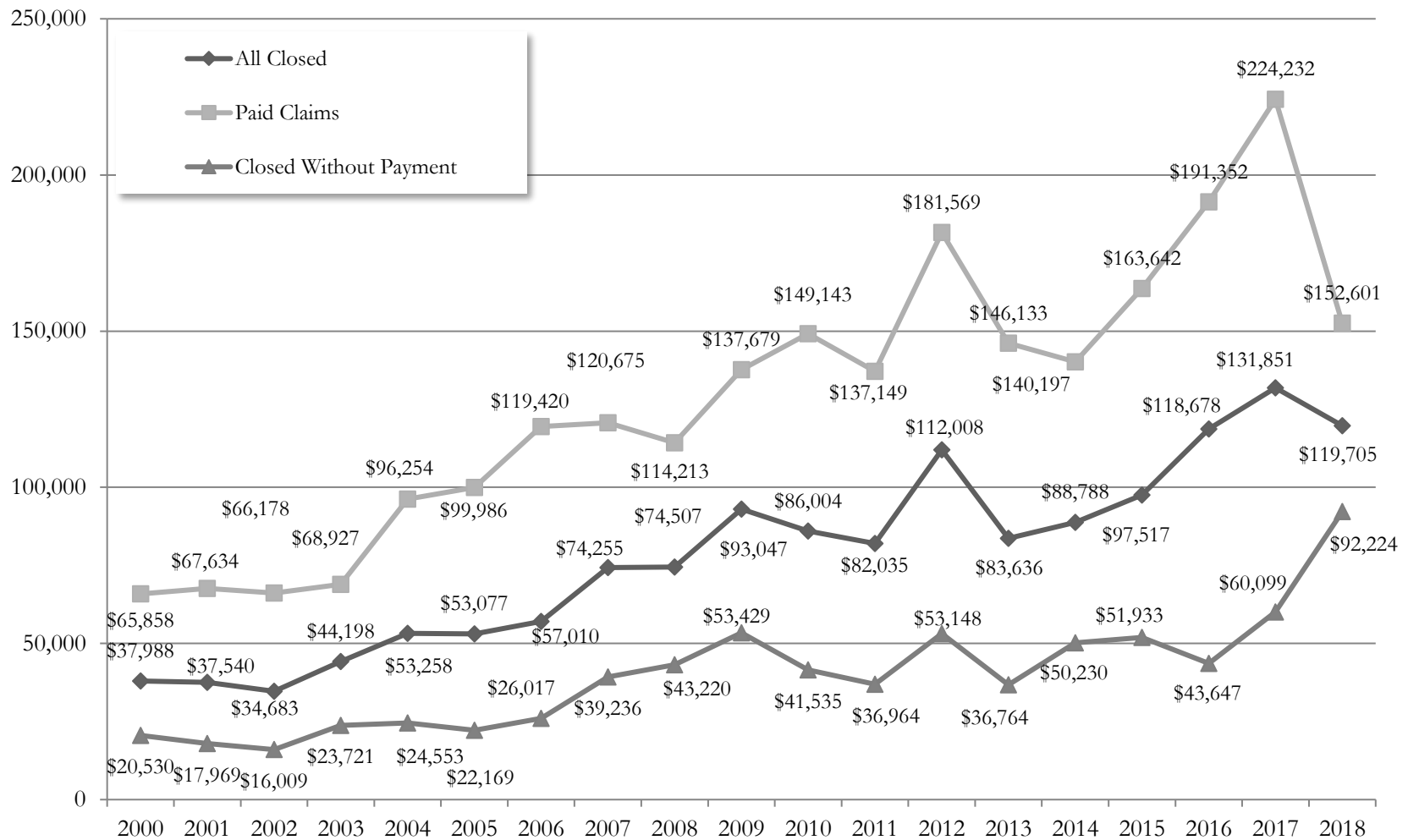
Average Indemnity Paid - Cases Involving at Least One Hospital



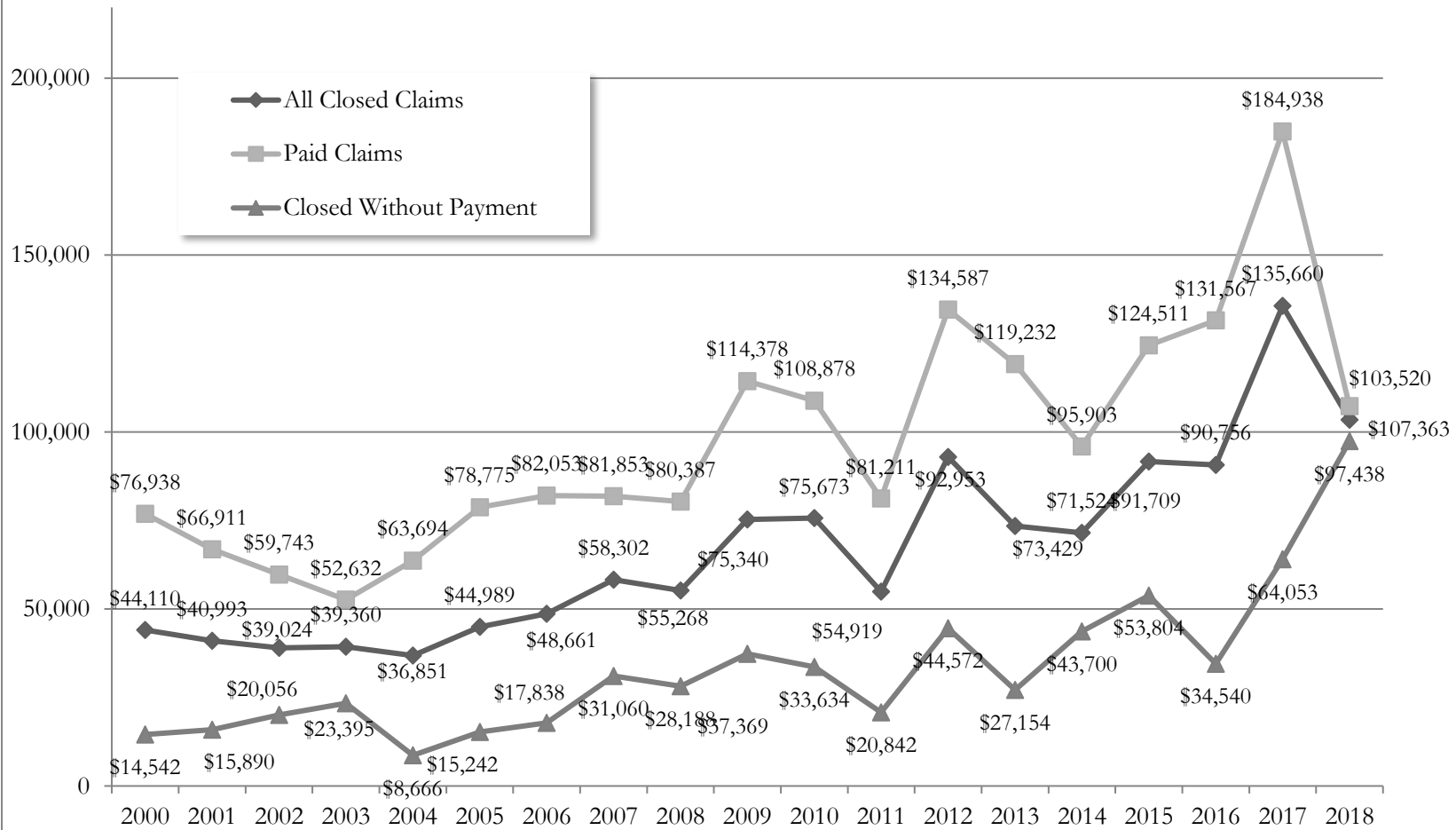
All Cases - Loss Adjustment Expense



Cases With A Least One Physician or Surgeon Loss Adjustment Expense



Cases Involving at Least One Hospital Loss Adjustment Expense



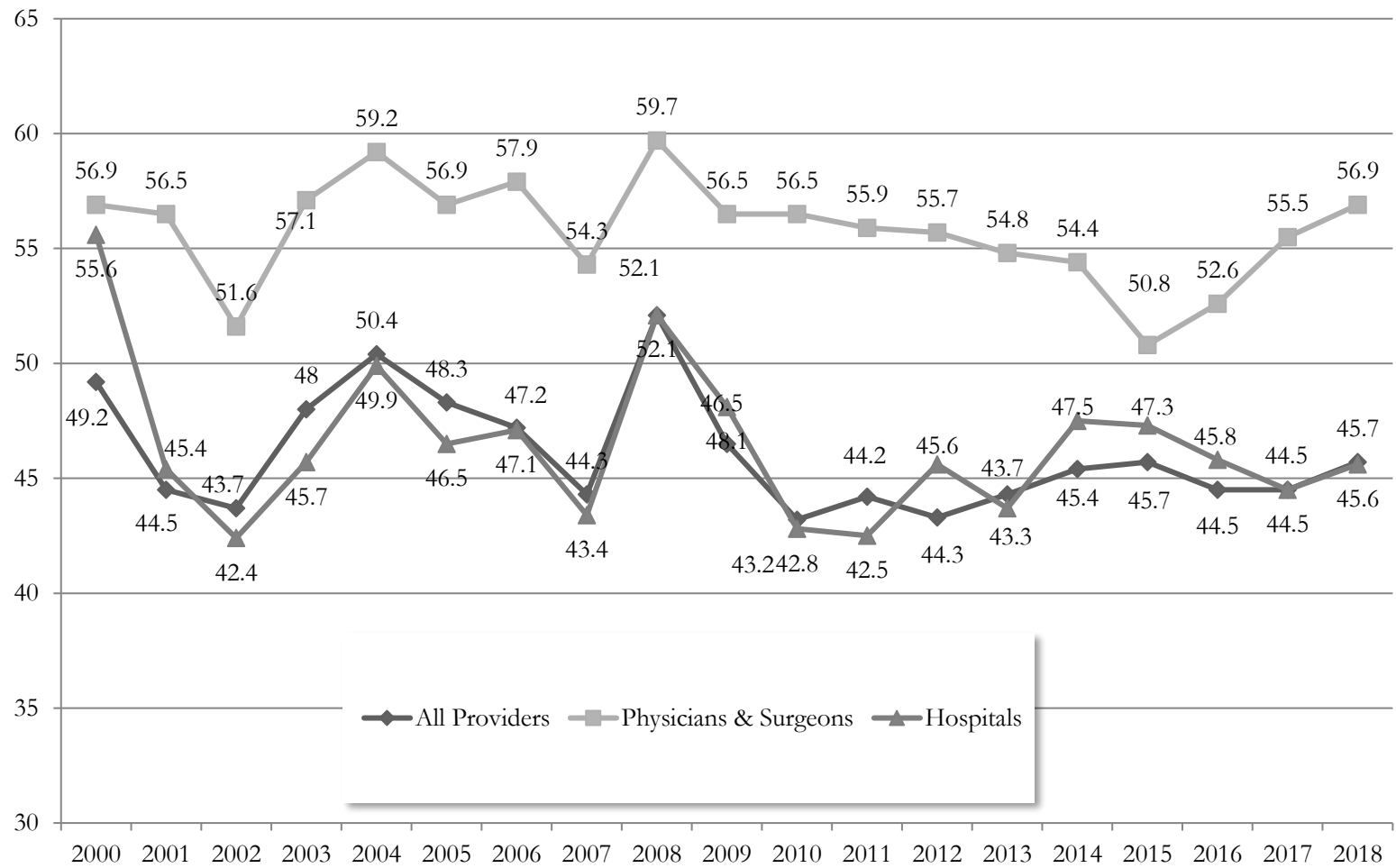
Court Filings by County Prior Ten Years				
County	Total Court Filings	Closed With Payment	Total Indemnity	Average Indemnity
Adair	28	17	\$4,638,625	\$272,860
Andrew	1	1	\$250,000	\$250,000
Atchison	5	4	\$1,045,742	\$261,436
Audrain	27	14	\$3,109,728	\$222,123
Barry	10	8	\$1,895,703	\$236,963
Barton	3	2	\$225,000	\$112,500
Bates	3	2	\$650,000	\$325,000
Benton	3	1	\$25,000	\$25,000
Bollinger	1	0	\$0	\$0
Boone	199	104	\$83,185,665	\$799,862
Buchanan	120	68	\$33,579,018	\$493,809
Butler	50	29	\$9,216,800	\$317,821
Caldwell	0	0	\$0	\$0
Callaway	12	4	\$930,000	\$232,500
Camden	61	32	\$8,198,754	\$256,211
Cape Girardeau	92	42	\$16,380,991	\$390,024
Carroll	6	4	\$1,410,000	\$352,500
Carter	2	0	\$0	\$0
Cass	44	23	\$6,112,662	\$265,768
Cedar	4	1	\$250,000	\$250,000
Chariton	1	0	\$0	\$0
Christian	4	2	\$245,000	\$122,500
Clark	0	0	\$0	\$0
Clay	224	100	\$33,396,666	\$333,967
Clinton	17	7	\$2,887,500	\$412,500
Cole	138	47	\$15,480,600	\$329,374
Cooper	5	2	\$205,000	\$102,500
Crawford	12	5	\$227,500	\$45,500
Dade	1	0	\$0	\$0
Dallas	2	0	\$0	\$0
Daviess	2	1	\$251,410	\$251,410
DeKalb	2	2	\$150,000	\$75,000
Dent	5	2	\$250,000	\$125,000
Douglas	2	1	\$9,844	\$9,844
Dunklin	27	14	\$10,398,255	\$742,733
Franklin	24	8	\$5,001,011	\$625,126
Gasconade	2	0	\$0	\$0
Gentry	5	3	\$753,815	\$251,272
Greene	419	252	\$125,008,084	\$496,064

Court Filings by County Prior Ten Years				
County	Total Court Filings	Closed With Payment	Total Indemnity	Average Indemnity
Grundy	7	5	\$5,727,500	\$1,145,500
Harrison	3	1	\$180,000	\$180,000
Henry	18	10	\$3,644,498	\$364,450
Hickory	2	1	\$125,000	\$125,000
Holt	2	2	\$222,500	\$111,250
Howard	1	0	\$0	\$0
Howell	32	20	\$10,291,860	\$514,593
Iron	2	1	\$300,000	\$300,000
Jackson	948	547	\$266,148,858	\$486,561
Jasper	219	142	\$71,587,518	\$504,137
Jefferson	83	30	\$4,122,500	\$137,417
Johnson	31	21	\$6,075,708	\$289,319
Knox	3	2	\$70,000	\$35,000
Laclede	16	8	\$2,626,495	\$328,312
Lafayette	14	10	\$1,924,000	\$192,400
Lawrence	10	6	\$1,627,500	\$271,250
Lewis	2	1	\$142,000	\$142,000
Lincoln	5	2	\$117,500	\$58,750
Linn	8	4	\$840,000	\$210,000
Livingston	9	4	\$605,000	\$151,250
McDonald	1	0	\$0	\$0
Macon	3	1	\$200,000	\$200,000
Madison	6	4	\$2,046,689	\$511,672
Maries	1	0	\$0	\$0
Marion	26	12	\$10,933,927	\$911,161
Mercer	1	0	\$0	\$0
Miller	3	0	\$0	\$0
Mississippi	5	2	\$110,000	\$55,000
Moniteau	5	1	\$10,000	\$10,000
Monroe	0	0	\$0	\$0
Montgomery	1	0	\$0	\$0
Morgan	3	2	\$200,000	\$100,000
New Madrid	2	0	\$0	\$0
Newton	25	14	\$6,532,000	\$466,571
Nodaway	14	6	\$3,920,600	\$653,433
Oregon	1	1	\$75,000	\$75,000
Osage	1	0	\$0	\$0
Ozark	0	0	\$0	\$0
Pemiscot	9	3	\$357,500	\$119,167

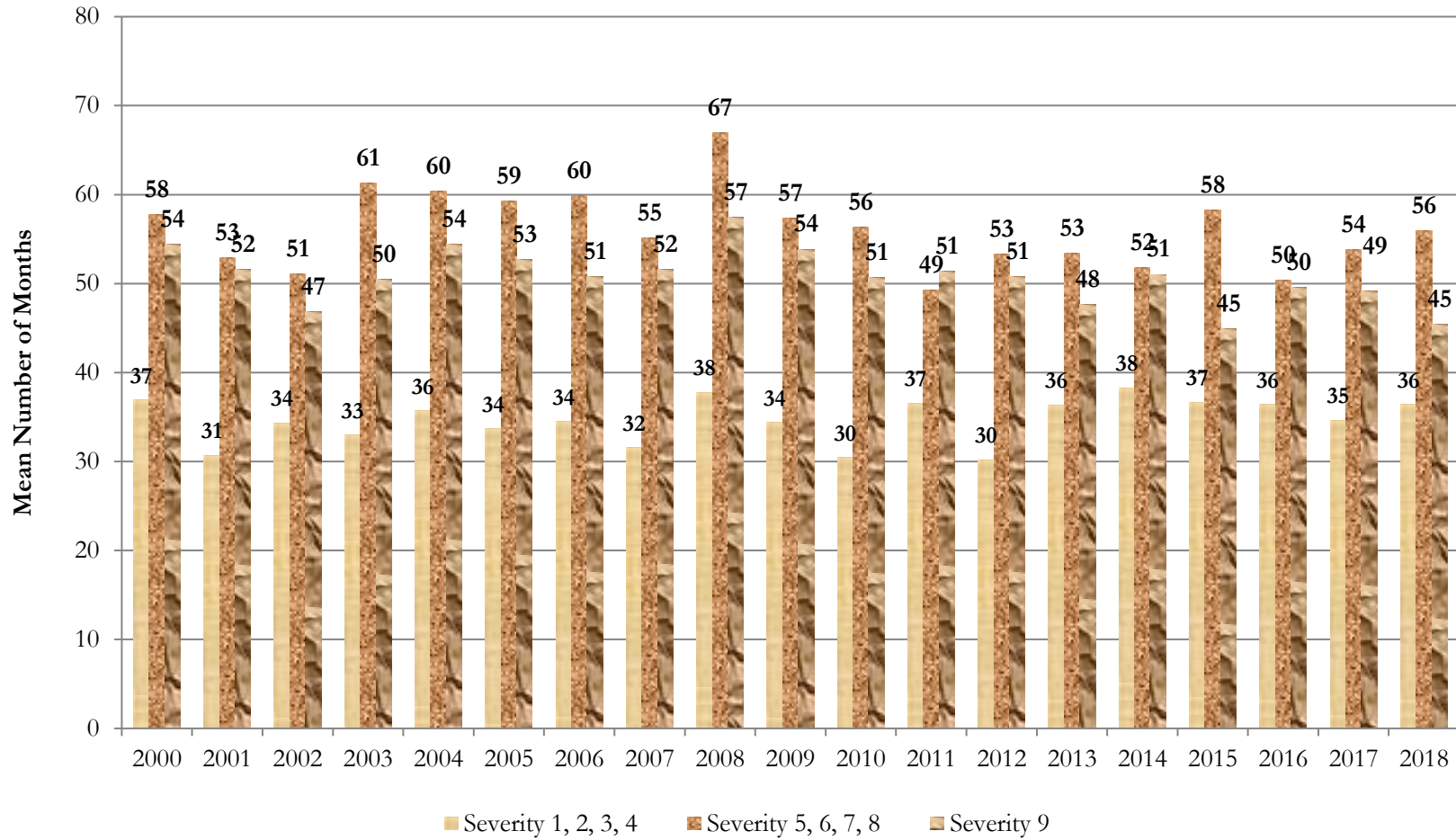
Court Filings by County Prior Ten Years				
County	Total Court Filings	Closed With Payment	Total Indemnity	Average Indemnity
Perry	4	1	\$412,500	\$412,500
Pettis	20	14	\$4,302,000	\$307,286
Phelps	50	24	\$4,653,850	\$193,910
Pike	11	2	\$2,230,000	\$1,115,000
Platte	29	16	\$4,666,000	\$291,625
Polk	23	12	\$2,076,152	\$173,013
Pulaski	5	3	\$1,103,750	\$367,917
Putnam	1	0	\$0	\$0
Ralls	2	1	\$50,000	\$50,000
Randolph	13	8	\$3,085,000	\$385,625
Ray	5	4	\$829,500	\$207,375
Reynolds	1	1	\$300,000	\$300,000
Ripley	5	1	\$332,500	\$332,500
Saint Charles	148	64	\$12,437,133	\$194,330
Saint Clair	10	6	\$1,610,000	\$268,333
Sainte Genevieve	7	3	\$2,300,000	\$766,667
Saint Francois	43	23	\$6,054,873	\$263,255
Saint Louis	1,204	547	\$193,799,314	\$354,295
Saline	25	14	\$5,868,099	\$419,150
Schuyler	0	0	\$0	\$0
Scotland	4	2	\$505,000	\$252,500
Scott	46	28	\$10,149,089	\$362,467
Shannon	1	1	\$80,000	\$80,000
Shelby	1	0	\$0	\$0
Stoddard	4	2	\$355,000	\$177,500
Stone	5	2	\$275,000	\$137,500
Sullivan	1	0	\$0	\$0
Taney	40	16	\$4,001,765	\$250,110
Texas	15	3	\$325,000	\$108,333
Vernon	11	11	\$5,862,500	\$532,955
Warren	3	2	\$2,970,000	\$1,485,000
Washington	6	1	\$250,000	\$250,000
Wayne	4	2	\$370,002	\$185,001
Webster	5	2	\$615,000	\$307,500
Worth	1	0	\$0	\$0
Wright	0	0	\$0	\$0
Saint Louis City	638	322	\$194,735,419	\$604,768
Appellate Court	3	0	\$0	\$0
Federal Court	219	39	\$15,190,257	\$389,494

Court Filings by County Prior Ten Years				
County	Total Court Filings	Closed With Payment	Total Indemnity	Average Indemnity
Guaranty Fund	2	1	\$47,500	\$47,500
Out Of State	133	51	\$16,243,773	\$318,505

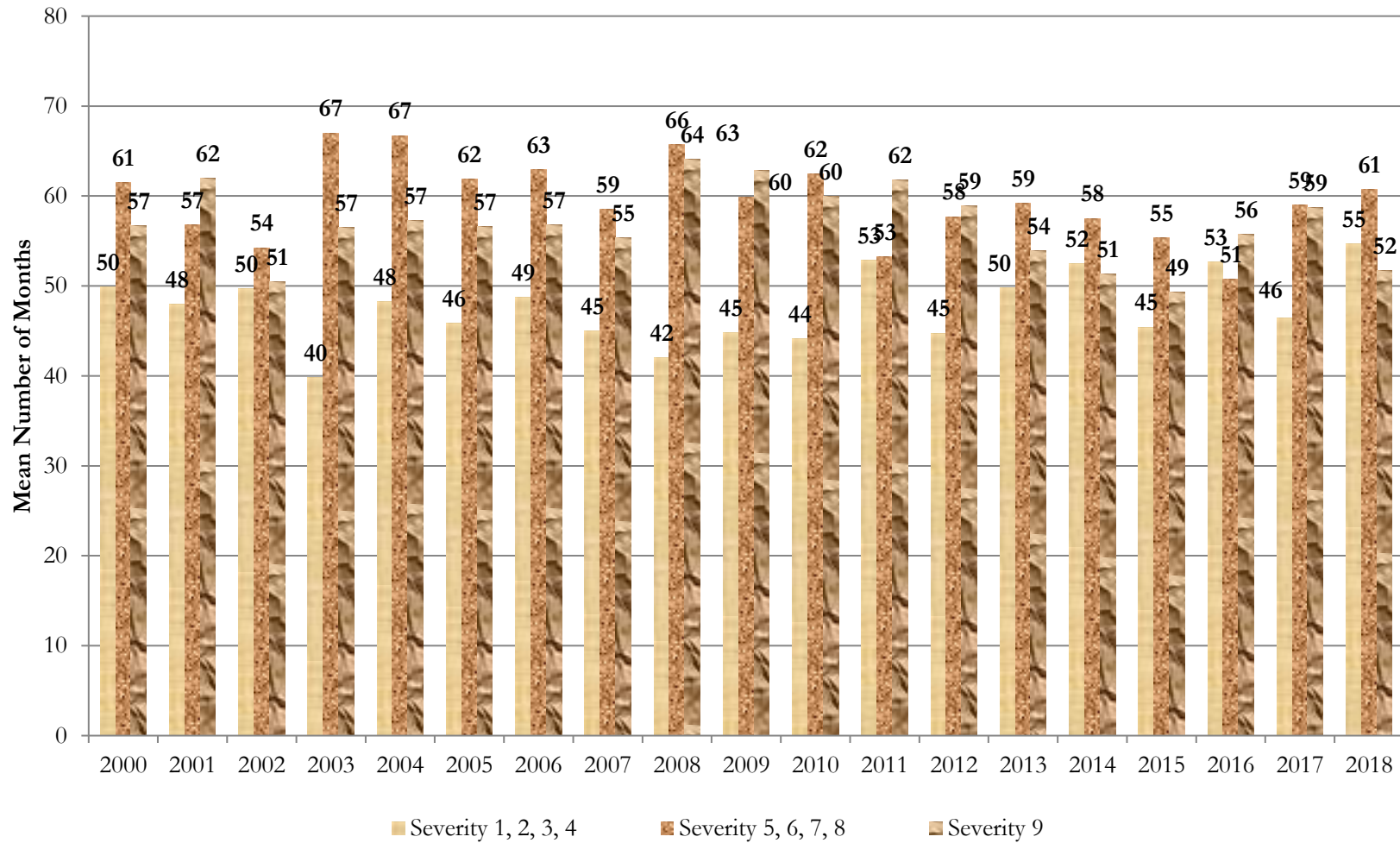
Closed With Payment
Mean number of months from incident to disposition



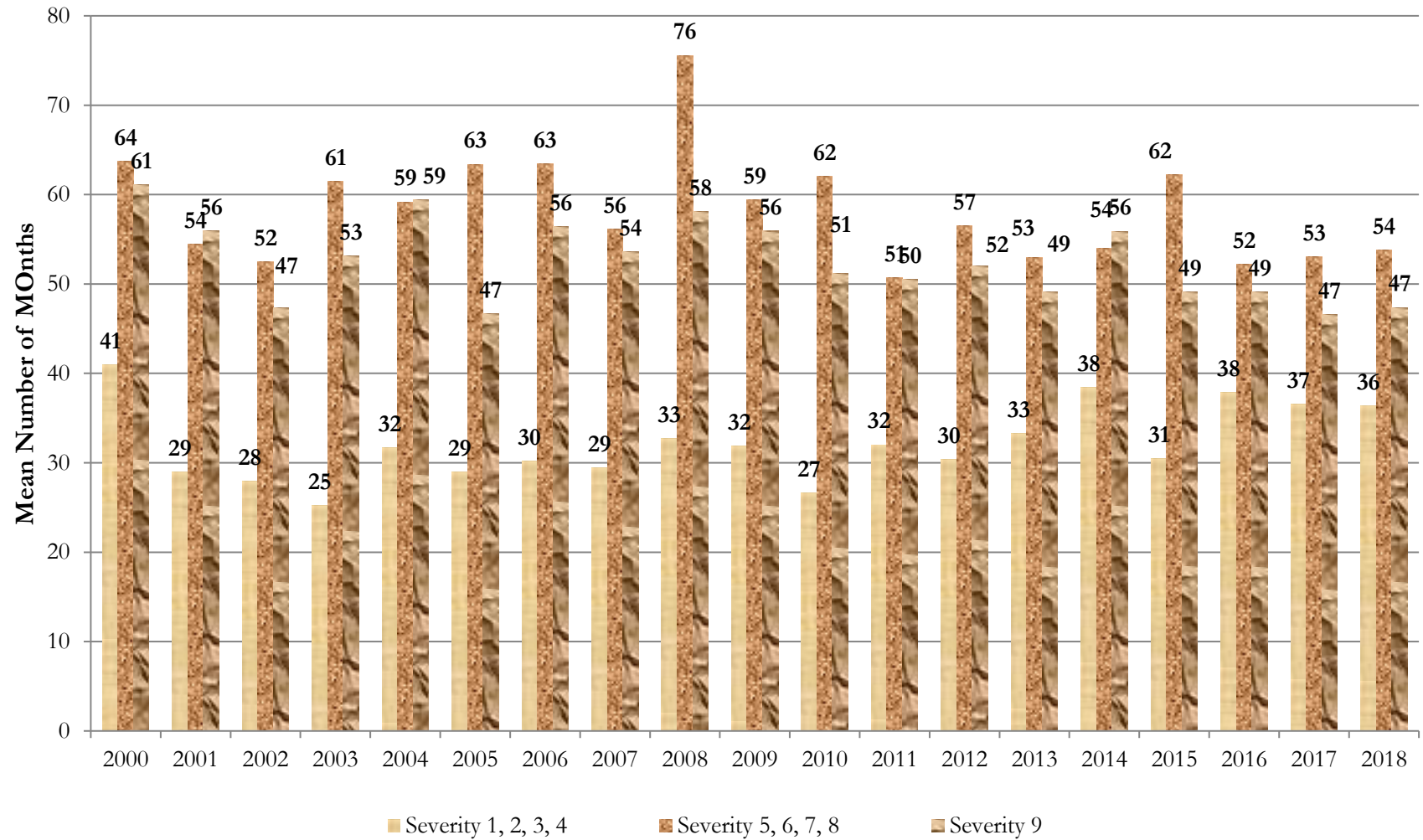
Bodily Injury Severity of Paid Claims - All Providers **Mean Number of Months from Incident to Disposition**



Bodily Injury Severity of Paid Claims - Physicians & Surgeons **Mean Number of Months from Incident to Disposition**



Bodily Injury Severity of Paid Claims - Hospitals **Mean Number of Months from Incident to Disposition**



Section II

Claim Severity

This section classifies individual claim data based on the amount of indemnity paid. The data for all medical providers, physicians & Surgeons, and Hospitals are presented separately for the years preceding three years. Summaries include:

- Average number of months from incident to close
- Number of claims reported and closed
- Cumulative percentage of number of claims
- Total indemnity paid
- Cumulative percentage of indemnity paid for closed claims
- Average economic damages
- Average non-economic damages
- Average indemnity
- Average loss adjustment expense

The following terms are used in subsequent tables:

Economic damages: damages arising from monetary harm including medical bills, lost wages, and lost earning capacity.

Non-economic damages: damages arising from non-monetary harm, including mental anguish, inconvenience, physical impairment, disfigurement, loss of capacity to enjoy life and loss of consortium.

Loss adjustment expenses: expense paid to defense counsel and all other allocated loss adjustment expenses, such as filing fees, telephone charges, and fees for expert witnesses.

Summary by Indemnity Range Awarded to Each Injured Party, All Cases Closed in 2018									
Indemnity Range	Average Months	Closed Claims	Cumulative % of Claims	Indemnity Paid	Cumulative % of Indemnity Paid	Average Economic Damages	Average Non-Economic Damages	Average Indemnity	Average Expense
None	45	359	52.0%	\$0	0.00%	\$0	\$0	\$0	\$51,506
1,000 - 1,999	11	5	52.7%	\$3,300	0.00%	\$140	\$520	\$660	\$149
2,000 - 2,999	13	3	53.1%	\$7,500	0.01%	\$917	\$1,583	\$2,500	\$116
3,000 - ,3999	5	1	53.3%	\$3,500	0.01%	\$0	\$3,500	\$3,500	\$0
4,000 - 4,999	63	2	53.6%	\$8,250	0.01%	\$1,063	\$1,063	\$4,125	\$9,249
5,000 - 5,999	32	4	54.1%	\$20,720	0.03%	\$2,000	\$3,180	\$5,180	\$45,893
6,000 - 6,999	16	2	54.4%	\$12,500	0.03%	\$3,620	\$2,630	\$6,250	\$2,385
7,000 - 7,999	33	4	55.0%	\$29,500	0.05%	\$5,198	\$2,178	\$7,375	\$3,729
8,000 - 8,999	13	2	55.3%	\$16,000	0.06%	\$2,240	\$5,760	\$8,000	\$127
10,000 - 19,999	31	15	57.5%	\$204,882	0.19%	\$6,424	\$6,957	\$13,659	\$11,981
20,000 - 29,999	35	20	60.4%	\$474,900	0.48%	\$7,655	\$14,840	\$23,745	\$12,730
30,000 - 39,999	79	6	61.2%	\$187,500	0.59%	\$14,133	\$17,117	\$31,250	\$57,776
40,000 - 49,999	29	6	62.1%	\$259,500	0.75%	\$13,958	\$29,292	\$43,250	\$24,739
50,000 - 59,999	40	10	63.5%	\$509,500	1.06%	\$21,475	\$29,475	\$50,950	\$46,688
60,000 - 69,999	29	8	64.7%	\$493,500	1.36%	\$22,933	\$38,754	\$61,688	\$73,235
70,000 - 79,999	39	14	66.7%	\$1,045,349	1.99%	\$17,913	\$51,397	\$74,668	\$72,893
80,000 - 89,999	46	4	67.3%	\$333,833	2.20%	\$20,750	\$62,708	\$83,458	\$12,366
90,000 - 99,999	52	6	68.2%	\$545,000	2.53%	\$45,900	\$44,933	\$90,833	\$64,468
100,000 -199,999	43	45	74.7%	\$6,256,570	6.34%	\$59,776	\$79,259	\$139,035	\$74,492
200,000 - 299,999	50	52	82.2%	\$12,387,000	13.88%	\$95,915	\$142,296	\$238,212	\$80,554
300,000 - 399,999	42	34	87.1%	\$11,266,440	20.73%	\$92,743	\$225,878	\$331,366	\$64,128
400,000 - 499,999	55	16	89.4%	\$6,792,000	24.87%	\$170,012	\$254,488	\$424,500	\$105,667
500,000 - 999,999	64	36	94.7%	\$24,844,753	39.99%	\$315,625	\$374,507	\$690,132	\$154,930
1,000,000 - 1,999,999	49	20	97.5%	\$27,747,491	56.88%	\$829,322	\$558,053	\$1,387,375	\$211,699
2,000,000 - 2,999,999	65	8	98.7%	\$18,900,000	68.38%	\$1,102,968	\$1,259,532	\$2,362,500	\$221,320
3,000,000 - 3,999,999	56	4	99.3%	\$14,175,000	77.01%	\$2,313,215	\$1,230,535	\$3,543,750	\$447,852
Over 4,000,000	49	5	100.0%	\$37,773,768	100.00%	\$3,540,754	\$3,014,000	\$7,554,754	\$445,231
Total	45	691		\$164,298,256		\$113,968	\$115,781	\$237,769	\$71,149
Total (Paid Only)	46	332		\$164,298,256		\$237,204	\$240,979	\$494,874	\$92,390

Summary by Indemnity Range Awarded to Each Injured Party Closed in 2018, Cases Involving at least One Physician or Surgeon									
Indemnity Range	Average Months	Number of Closed Claims	Cumulative % of Claims	Indemnity Paid	Cumulative % of Indemnity Paid	Average Economic Damages	Average Non- Economic Damages	Average Indemnity	Average Expense
None	48	164	54.5%	\$0	0.0%	\$0	\$0	\$0	\$92,224
5,000 - 5,999	55	2	55.2%	\$10,000	0.0%	\$2,500	\$2,500	\$5,000	\$89,797
7,000 - 7,999	40	1	55.5%	\$7,500	0.0%	\$7,500	\$0	\$7,500	\$12,902
10,000 - 19,999	51	4	56.8%	\$53,306	0.1%	\$9,727	\$3,600	\$13,327	\$33,410
20,000 - 29,999	58	4	58.1%	\$97,500	0.2%	\$7,000	\$17,375	\$24,375	\$28,685
30,000 - 39,999	53	3	59.1%	\$95,000	0.3%	\$12,433	\$19,233	\$31,667	\$104,321
40,000 - 49,999	47	2	59.8%	\$82,500	0.4%	\$30,625	\$10,625	\$41,250	\$59,054
50,000 - 59,999	56	2	60.5%	\$100,000	0.5%	\$12,625	\$37,375	\$50,000	\$103,670
60,000 - 69,999	42	2	61.1%	\$122,500	0.6%	\$15,000	\$46,250	\$61,250	\$273,221
70,000 - 79,999	58	6	63.1%	\$442,849	1.0%	\$20,000	\$53,808	\$73,808	\$158,023
90,000 - 99,999	84	2	63.8%	\$180,000	1.2%	\$67,500	\$22,500	\$90,000	\$58,219
100,000 -199,999	49	15	68.8%	\$2,125,000	3.4%	\$71,776	\$69,891	\$141,667	\$153,449
200,000 - 299,999	58	24	76.7%	\$5,852,500	9.4%	\$125,108	\$118,747	\$243,854	\$92,310
300,000 - 399,999	44	17	82.4%	\$5,980,864	15.5%	\$74,688	\$251,638	\$351,816	\$84,218
400,000 - 499,999	61	10	85.7%	\$4,210,000	19.9%	\$192,319	\$228,681	\$421,000	\$114,614
500,000 - 999,999	71	20	92.4%	\$13,023,855	33.2%	\$294,076	\$357,117	\$651,193	\$170,495
1,000,000 - 1,999,999	54	13	96.7%	\$16,702,500	50.4%	\$643,981	\$640,827	\$1,284,808	\$249,028
2,000,000 - 2,999,999	74	4	98.0%	\$8,450,000	59.0%	\$1,096,125	\$1,016,375	\$2,112,500	\$193,666
3,000,000 - 3,999,999	52	3	99.0%	\$11,175,000	70.5%	\$2,417,620	\$1,307,380	\$3,725,000	\$493,692
Over 4,000,000	50	3	100.0%	\$28,773,768	100.0%	\$3,567,923	\$4,356,667	\$9,591,256	\$739,334
Total	52	301		\$97,484,642		\$147,358	\$158,461	\$323,869	\$119,705
Total (Paid Only)	57	137		\$97,484,642		\$323,757	\$348,150	\$711,567	\$152,601

Summary by Indemnity Range Awarded to Each Injured Party Closed in 2018, Cases Involving at least One Hospital									
Indemnity Range	Average Months	Number of Closed Claims	Cumulative % of Claims	Indemnity Paid	Cumulative % of Indemnity Paid	Average Economic Damages	Average Non- Economic Damages	Average Indemnity	Average Expense
None	54	127	38.72%	\$0	0.00%	\$0	\$0	\$0	\$97,438
1,000 - 1,999	7	4	39.94%	\$2,550	0.00%	\$63	\$575	\$638	\$186
2,000 - 2,999	17	2	40.55%	\$5,000	0.01%	\$750	\$1,750	\$2,500	\$0
3,000 - ,3999	5	1	40.85%	\$3,500	0.01%	\$0	\$3,500	\$3,500	\$0
5,000 - 5,999	34	3	41.77%	\$15,720	0.02%	\$1,000	\$4,240	\$5,240	\$59,735
6,000 - 6,999	16	2	42.38%	\$12,500	0.04%	\$3,620	\$2,630	\$6,250	\$2,385
7,000 - 7,999	16	1	42.68%	\$7,500	0.04%	\$4,500	\$3,000	\$7,500	\$2,012
8,000 - 8,999	13	2	43.29%	\$16,000	0.06%	\$2,240	\$5,760	\$8,000	\$127
10,000 - 19,999	29	7	45.43%	\$99,052	0.15%	\$6,401	\$7,749	\$14,150	\$7,709
20,000 - 29,999	41	12	49.09%	\$284,900	0.40%	\$7,717	\$16,025	\$23,742	\$16,741
30,000 - 39,999	35	2	49.70%	\$60,000	0.46%	\$8,400	\$21,600	\$30,000	\$134,719
40,000 - 49,999	26	2	50.30%	\$85,000	0.53%	\$0	\$42,500	\$42,500	\$4,579
50,000 - 59,999	37	6	52.13%	\$309,500	0.81%	\$14,958	\$36,625	\$51,583	\$46,130
60,000 - 69,999	25	4	53.35%	\$247,500	1.04%	\$21,250	\$40,625	\$61,875	\$9,873
70,000 - 79,999	41	8	55.79%	\$592,849	1.57%	\$20,625	\$53,481	\$74,106	\$99,709
80,000 - 89,999	40	1	56.10%	\$83,000	1.65%	\$3,000	\$80,000	\$83,000	\$17,887
90,000 - 99,999	47	4	57.32%	\$365,000	1.98%	\$57,600	\$33,650	\$91,250	\$83,048
100,000 -199,999	43	26	65.24%	\$3,667,070	5.29%	\$59,396	\$81,646	\$141,041	\$50,296
200,000 - 299,999	57	31	74.70%	\$7,325,000	11.91%	\$100,872	\$135,419	\$236,290	\$99,786
300,000 - 399,999	41	23	81.71%	\$7,550,576	18.73%	\$89,962	\$238,324	\$328,286	\$69,321
400,000 - 499,999	44	9	84.45%	\$3,895,000	22.24%	\$97,021	\$335,757	\$432,778	\$118,941
500,000 - 999,999	68	27	92.68%	\$18,390,419	38.86%	\$389,680	\$291,446	\$681,127	\$170,329
1,000,000 - 1,999,999	46	13	96.65%	\$18,844,991	55.88%	\$856,942	\$592,673	\$1,449,615	\$236,706
2,000,000 - 2,999,999	49	4	97.87%	\$9,900,000	64.82%	\$690,311	\$1,784,689	\$2,475,000	\$306,055
3,000,000 - 3,999,999	56	4	99.09%	\$14,175,000	77.62%	\$2,313,215	\$1,230,535	\$3,543,750	\$447,852
Over 4,000,000	55	3	100.00%	\$24,773,768	100.00%	\$4,507,923	\$2,083,333	\$8,257,923	\$545,941
Total	49	328		\$110,711,395		\$169,395	\$152,896	\$337,535	\$103,520
Total (Paid Only)	46	201		\$110,711,395		\$276,425	\$249,502	\$550,803	\$107,363

Summary by Indemnity Range Awarded to Each Injured Party - Closed in 2017, All Cases									
Indemnity Range	Average Months	Number of Closed Claims	Cumulative % of Claims	Indemnity Paid	Cumulative % of Indemnity Paid	Average Economic Damages	Average Non-Economic Damages	Average Indemnity	Average Expense
None	43	407	53.3%	\$0	0.0%	\$0	\$0	\$0	\$38,056
1,000 - 1,999	23	7	54.3%	\$5,869	0.0%	\$257	\$581	\$838	\$6,392
2,000 - 2,999	14	4	54.8%	\$10,375	0.0%	\$900	\$1,694	\$2,594	\$1,976
3,000 - ,3999	19	2	55.1%	\$7,150	0.0%	\$0	\$3,575	\$3,575	\$1,117
5,000 - 5,999	17	5	55.7%	\$26,540	0.0%	\$3,268	\$2,040	\$5,308	\$2,584
7,000 - 7,999	10	1	55.8%	\$7,000	0.0%	\$0	\$7,000	\$7,000	\$0
9,000 - 9,999	26	3	56.2%	\$27,870	0.1%	\$6,145	\$3,145	\$9,290	\$2,597
10,000 - 19,999	28	15	58.2%	\$188,866	0.2%	\$4,834	\$7,757	\$12,591	\$27,451
20,000 - 29,999	43	19	60.7%	\$437,500	0.5%	\$8,332	\$14,695	\$23,026	\$66,638
30,000 - 39,999	41	9	61.9%	\$292,500	0.7%	\$7,905	\$24,595	\$32,500	\$41,679
40,000 - 49,999	38	14	63.7%	\$588,602	1.2%	\$15,655	\$26,388	\$42,043	\$34,867
50,000 - 59,999	48	13	65.4%	\$665,002	1.7%	\$12,200	\$38,954	\$51,154	\$49,977
60,000 - 69,999	40	6	66.2%	\$372,831	1.9%	\$12,083	\$50,055	\$62,139	\$19,956
70,000 - 79,999	45	16	68.3%	\$1,194,500	2.8%	\$39,692	\$34,965	\$74,656	\$53,568
80,000 - 89,999	39	6	69.1%	\$502,000	3.2%	\$36,780	\$46,887	\$83,667	\$33,171
90,000 - 99,999	41	8	70.1%	\$750,499	3.7%	\$17,656	\$76,156	\$93,812	\$99,869
100,000 -199,999	42	81	80.7%	\$11,626,381	12.2%	\$39,332	\$99,698	\$143,536	\$55,573
200,000 - 299,999	51	53	87.7%	\$12,497,265	21.4%	\$67,091	\$164,912	\$235,797	\$99,497
300,000 - 399,999	45	25	91.0%	\$8,288,000	27.4%	\$97,758	\$233,762	\$331,520	\$82,488
400,000 - 499,999	40	12	92.5%	\$5,124,472	31.2%	\$126,900	\$300,140	\$427,039	\$58,278
500,000 - 999,999	63	30	96.5%	\$19,773,157	45.6%	\$328,956	\$313,394	\$659,105	\$180,502
1,000,000 - 1,999,999	51	14	98.3%	\$17,325,000	58.3%	\$453,906	\$783,594	\$1,237,500	\$258,728
2,000,000 - 2,999,999	54	4	98.8%	\$10,225,000	65.8%	\$1,182,500	\$1,373,750	\$2,556,250	\$182,556
3,000,000 - 3,999,999	59	2	99.1%	\$7,450,000	71.3%	\$1,975,000	\$1,750,000	\$3,725,000	\$132,981
Over 4,000,000	70	7	100.0%	\$39,300,020	100.0%	\$2,657,146	\$2,957,143	\$5,614,289	\$2,430,225
Total	44	763		\$136,686,399		\$73,396	\$104,347	\$179,143	\$79,045
Total (Paid Only)	44	356		\$136,686,399		\$157,307	\$223,642	\$383,951	\$125,906

Summary by Indemnity Range Awarded to Each Injured Party Closed in 2017, Cases Involving at least Physician or Surgeon									
Indemnity Range	Average Months	Number of Closed Claims	Cumulative % of Claims	Indemnity Paid	Cumulative % of Indemnity Paid	Average Economic Damages	Average Non- Economic Damages	Average Indemnity	Average Expense
None	50	206	56.3%	\$0	0.0%	\$0	\$0	\$0	\$60,099
2,000 - 2,999	26	1	56.6%	\$2,500	0.0%	\$1,400	\$1,100	\$2,500	\$7,830
10,000 - 19,999	42	5	57.9%	\$69,500	0.1%	\$9,355	\$4,545	\$13,900	\$79,332
20,000 - 29,999	48	7	59.8%	\$160,000	0.3%	\$10,271	\$12,586	\$22,857	\$111,207
30,000 - 39,999	40	3	60.7%	\$100,000	0.4%	\$382	\$32,951	\$33,333	\$93,628
40,000 - 49,999	56	5	62.0%	\$210,000	0.6%	\$21,560	\$20,440	\$42,000	\$73,574
50,000 - 59,999	69	5	63.4%	\$255,000	0.9%	\$0	\$51,000	\$51,000	\$94,082
60,000 - 69,999	23	1	63.7%	\$67,500	1.0%	\$7,500	\$60,000	\$67,500	\$0
70,000 - 79,999	60	8	65.9%	\$594,500	1.7%	\$46,503	\$27,810	\$74,313	\$81,755
80,000 - 89,999	51	2	66.4%	\$165,000	1.9%	\$0	\$82,500	\$82,500	\$38,000
90,000 - 99,999	55	4	67.5%	\$365,000	2.3%	\$11,250	\$80,000	\$91,250	\$78,453
100,000 -199,999	52	32	76.2%	\$4,658,606	7.6%	\$44,404	\$101,178	\$145,581	\$86,012
200,000 - 299,999	57	27	83.6%	\$6,300,598	14.8%	\$78,733	\$147,174	\$233,355	\$134,436
300,000 - 399,999	53	15	87.7%	\$4,996,500	20.5%	\$104,116	\$228,984	\$333,100	\$108,541
400,000 - 499,999	43	9	90.2%	\$3,874,472	24.9%	\$148,417	\$282,080	\$430,497	\$75,472
500,000 - 999,999	69	19	95.4%	\$12,515,157	39.2%	\$335,433	\$296,804	\$658,692	\$201,958
1,000,000 - 1,999,999	58	7	97.3%	\$8,290,000	48.7%	\$366,429	\$817,857	\$1,184,286	\$373,311
2,000,000 - 2,999,999	56	3	98.1%	\$7,725,000	57.5%	\$1,576,667	\$998,333	\$2,575,000	\$243,408
3,000,000 - 3,999,999	59	2	98.6%	\$7,450,000	66.0%	\$1,975,000	\$1,750,000	\$3,725,000	\$132,981
Over 4,000,000	67	5	100.0%	\$29,800,020	100.0%	\$2,320,004	\$3,640,000	\$5,960,004	\$3,279,003
Total	52	366	.	\$87,599,353	.	\$99,224	\$138,196	\$239,342	\$131,851
Total (Paid Only)	55	160	.	\$87,599,353	.	\$226,975	\$316,122	\$547,496	\$224,232

Summary by Indemnity Range Awarded to Each Injured Party - Cases Involving at least Hospital Closed in 2017									
Indemnity Range	Average Months	Number of Closed Claims	Cumulative % of Claims	Indemnity Paid	Cumulative % of Indemnity Paid	Average Economic Damages	Average Non-Economic Damages	Average Indemnity	Average Expense
None	47	128	40.8%	\$0	0.0%	\$0	\$0	\$0	\$64,053
1,000 - 1,999	23	7	43.0%	\$5,869	0.0%	\$257	\$581	\$838	\$6,392
2,000 - 2,999	17	2	43.6%	\$5,000	0.0%	\$700	\$1,800	\$2,500	\$3,915
5,000 - 5,999	18	2	44.3%	\$10,500	0.0%	\$4,040	\$1,210	\$5,250	\$4,994
7,000 - 7,999	10	1	44.6%	\$7,000	0.0%	\$0	\$7,000	\$7,000	\$0
10,000 - 19,999	26	10	47.8%	\$118,866	0.2%	\$3,173	\$8,713	\$11,887	\$23,246
20,000 - 29,999	48	15	52.6%	\$355,000	0.6%	\$8,220	\$15,447	\$23,667	\$72,418
30,000 - 39,999	47	6	54.5%	\$197,500	0.8%	\$11,667	\$21,250	\$32,917	\$50,318
40,000 - 49,999	44	3	55.4%	\$125,102	0.9%	\$7,600	\$34,101	\$41,701	\$88,872
50,000 - 59,999	47	5	57.0%	\$255,001	1.2%	\$30,309	\$20,691	\$51,000	\$32,842
60,000 - 69,999	47	3	58.0%	\$185,331	1.4%	\$11,667	\$50,110	\$61,777	\$17,466
70,000 - 79,999	42	5	59.6%	\$379,500	1.9%	\$47,304	\$28,596	\$75,900	\$49,682
80,000 - 89,999	45	5	61.2%	\$414,500	2.3%	\$35,386	\$47,514	\$82,900	\$39,805
90,000 - 99,999	44	5	62.7%	\$467,999	2.9%	\$0	\$93,600	\$93,600	\$139,748
100,000 -199,999	40	30	72.3%	\$4,215,275	7.6%	\$31,974	\$108,535	\$140,509	\$73,436
200,000 - 299,999	47	28	81.2%	\$6,519,667	15.0%	\$53,100	\$179,745	\$232,845	\$91,119
300,000 - 399,999	40	15	86.0%	\$5,041,500	20.7%	\$116,120	\$219,980	\$336,100	\$80,915
400,000 - 499,999	40	8	88.5%	\$3,399,472	24.6%	\$135,506	\$289,428	\$424,934	\$75,653
500,000 - 999,999	61	17	94.0%	\$11,695,500	37.8%	\$329,041	\$358,930	\$687,971	\$244,968
1,000,000 - 1,999,999	50	8	96.5%	\$10,925,000	50.2%	\$685,000	\$680,625	\$1,365,625	\$352,610
2,000,000 - 2,999,999	54	4	97.8%	\$10,225,000	61.8%	\$1,182,500	\$1,373,750	\$2,556,250	\$182,556
3,000,000 - 3,999,999	59	2	98.4%	\$7,450,000	70.2%	\$1,975,000	\$1,750,000	\$3,725,000	\$132,981
Over 4,000,000	83	5	100.0%	\$26,300,020	100.0%	\$1,400,004	\$3,860,000	\$5,260,004	\$3,306,209
Total	46	314	.	\$88,298,602	.	\$104,728	\$176,477	\$281,206	\$135,660
Total (Paid Only)	45	186	.	\$88,298,602	.	\$176,799	\$297,924	\$474,724	\$184,938

Summary by Indemnity Range Awarded to Each Injured Party Closed in 2016, All Cases									
Indemnity Range	Average Months	Number of Closed Claims	Cumulative % of Claims	Indemnity Paid	Cumulative % of Indemnity Paid	Average Economic Damages	Average Non- Economic Damages	Average Indemnity	Average Expense
None	42	409	50.7%	\$0	0.0%	\$0	\$0	\$0	\$26,930
1,000 - 1,999	25	10	52.0%	\$9,898	0.0%	\$513	\$477	\$990	\$4,268
2,000 - 2,999	21	6	52.7%	\$13,592	0.0%	\$240	\$2,025	\$2,265	\$1,048
3,000 - ,3999	13	2	53.0%	\$6,899	0.0%	\$840	\$2,610	\$3,450	\$2,140
4,000 - 4,999	4	1	53.1%	\$4,874	0.0%	\$0	\$4,874	\$4,874	\$6,440
5,000 - 5,999	32	5	53.7%	\$25,000	0.0%	\$610	\$4,390	\$5,000	\$212
6,000 - 6,999	12	3	54.1%	\$19,400	0.0%	\$4,467	\$2,000	\$6,467	\$901
7,000 - 7,999	14	3	54.5%	\$21,638	0.1%	\$1,728	\$5,485	\$7,213	\$1,131
8,000 - 8,999	27	3	54.8%	\$24,500	0.1%	\$1,417	\$6,750	\$8,167	\$10,461
9,000 - 9,999	14	3	55.2%	\$28,007	0.1%	\$6,502	\$1,777	\$9,336	\$1,442
10,000 - 19,999	31	20	57.7%	\$245,160	0.2%	\$3,350	\$8,460	\$12,258	\$20,580
20,000 - 29,999	37	28	61.2%	\$647,163	0.6%	\$8,867	\$13,388	\$23,113	\$56,171
30,000 - 39,999	65	4	61.7%	\$124,000	0.6%	\$16,625	\$14,375	\$31,000	\$121,314
40,000 - 49,999	48	20	64.1%	\$838,533	1.1%	\$15,840	\$25,753	\$41,927	\$41,408
50,000 - 59,999	45	20	66.6%	\$1,040,748	1.6%	\$21,417	\$28,754	\$52,037	\$57,261
60,000 - 69,999	52	6	67.4%	\$378,500	1.8%	\$10,600	\$52,483	\$63,083	\$37,678
70,000 - 79,999	48	18	69.6%	\$1,326,500	2.5%	\$36,714	\$36,981	\$73,694	\$56,893
80,000 - 89,999	23	6	70.4%	\$498,333	2.8%	\$17,961	\$58,011	\$83,056	\$13,340
90,000 - 99,999	40	6	71.1%	\$561,909	3.1%	\$27,150	\$66,502	\$93,652	\$37,573
100,000 -199,999	45	60	78.5%	\$8,411,908	7.5%	\$51,670	\$83,432	\$140,198	\$83,121
200,000 - 299,999	48	45	84.1%	\$10,284,483	13.0%	\$88,894	\$137,021	\$228,544	\$99,985
300,000 - 399,999	40	22	86.9%	\$7,254,722	16.8%	\$139,807	\$189,953	\$329,760	\$123,864
400,000 - 499,999	68	22	89.6%	\$9,337,500	21.7%	\$141,750	\$282,682	\$424,432	\$229,808
500,000 - 999,999	45	42	94.8%	\$29,543,958	37.3%	\$297,476	\$405,952	\$703,428	\$156,171
1,000,000 - 1,999,999	50	21	97.4%	\$28,252,999	52.2%	\$899,072	\$446,309	\$1,345,381	\$278,134
2,000,000 - 2,999,999	54	7	98.3%	\$15,900,000	60.6%	\$976,146	\$1,295,283	\$2,271,429	\$404,203
3,000,000 - 3,999,999	106	3	98.64%	\$10,147,594	66.0%	\$2,145,833	\$1,236,698	\$3,382,531	\$537,283
Over 4,000,000	61	11	100.00%	\$64,365,000	100.0%	\$3,551,175	\$1,942,234	\$5,851,364	\$635,537
Total	43	806	.	\$189,312,818	.	\$123,050	\$106,266	\$234,879	\$72,227
Total (Paid Only)	44	397	.	\$189,312,818	.	\$249,819	\$215,744	\$476,858	\$118,893

Summary by Indemnity Range Awarded to Each Injured Party Closed in 2015, Cases Involving at least One Physician or Surgeon									
Indemnity Range	Average Months	Number of Closed Claims	Cumulative % of Claims	Indemnity Paid	Cumulative % of Indemnity Paid	Average Economic Damages	Average Non- Economic Damages	Average Indemnity	Average Expense
None	50	185	49.2%	\$0	0.0%	\$0	\$0	\$0	\$43,647
1,000 - 1,999	56	1	49.5%	\$1,000	0.0%	\$560	\$440	\$1,000	\$21,287
2,000 - 2,999	15	1	49.7%	\$2,592	0.0%	\$0	\$2,592	\$2,592	\$808
3,000 - ,3999	12	1	50.0%	\$3,000	0.0%	\$1,680	\$1,320	\$3,000	\$4,280
6,000 - 6,999	19	1	50.3%	\$6,600	0.0%	\$6,600	\$0	\$6,600	\$2,704
8,000 - 8,999	38	1	50.5%	\$8,000	0.0%	\$0	\$8,000	\$8,000	\$29,982
9,000 - 9,999	16	1	50.8%	\$9,500	0.0%	\$9,500	\$0	\$9,500	\$4,325
10,000 - 19,999	47	5	52.1%	\$62,250	0.1%	\$240	\$12,210	\$12,450	\$52,504
20,000 - 29,999	48	4	53.2%	\$97,000	0.1%	\$8,897	\$15,353	\$24,250	\$250,971
30,000 - 39,999	65	4	54.3%	\$124,000	0.2%	\$16,625	\$14,375	\$31,000	\$121,314
40,000 - 49,999	35	8	56.4%	\$347,908	0.5%	\$17,084	\$25,571	\$43,489	\$67,361
50,000 - 59,999	80	4	57.5%	\$205,000	0.6%	\$9,823	\$41,427	\$51,250	\$188,356
60,000 - 69,999	41	2	58.0%	\$125,000	0.7%	\$16,800	\$45,700	\$62,500	\$45,798
70,000 - 79,999	60	9	60.4%	\$665,000	1.1%	\$30,806	\$43,083	\$73,889	\$64,774
90,000 - 99,999	16	1	60.6%	\$90,000	1.2%	\$8,400	\$81,600	\$90,000	\$21,633
100,000 -199,999	52	31	68.9%	\$4,595,000	4.3%	\$57,508	\$82,251	\$148,226	\$120,096
200,000 - 299,999	54	22	74.7%	\$4,971,000	7.7%	\$92,749	\$133,205	\$225,955	\$126,635
300,000 - 399,999	45	10	77.4%	\$3,211,978	9.9%	\$152,059	\$169,139	\$321,198	\$169,736
400,000 - 499,999	70	18	82.2%	\$7,725,000	15.2%	\$158,667	\$270,500	\$429,167	\$260,588
500,000 - 999,999	46	34	91.2%	\$24,236,335	31.8%	\$334,173	\$378,660	\$712,833	\$149,998
1,000,000 - 1,999,999	48	14	95.0%	\$18,150,000	44.2%	\$868,000	\$428,429	\$1,296,429	\$292,849
2,000,000 - 2,999,999	54	7	96.8%	\$15,900,000	55.1%	\$976,146	\$1,295,283	\$2,271,429	\$404,203
3,000,000 - 3,999,999	90	2	97.3%	\$6,210,094	59.3%	\$1,250,000	\$1,855,047	\$3,105,047	\$428,192
Over 4,000,000	66	10	100.00%	\$59,465,000	100.00%	\$3,683,526	\$1,869,224	\$5,946,500	\$696,222
Total	51	376	.	\$146,211,257	.	\$208,773	\$168,898	\$388,860	\$118,678
Total (Paid Only)	53	191	.	\$146,211,257	.	\$410,989	\$332,491	\$765,504	\$191,352

Summary by Indemnity Range Awarded to Each Injured Party									
Closed in 2016, Cases Involving at least One Hospital									
Indemnity Range	Average Months	Number of Closed Claims	Cumulative % of Claims	Indemnity Paid	Cumulative % of Indemnity Paid	Average Economic Damages	Average Non-Economic Damages	Average Indemnity	Average Expense
None	43	151	42.1%	\$0	0.0%	\$0	\$0	\$0	\$34,540
1,000 - 1,999	32	4	43.2%	\$4,498	0.0%	\$557	\$568	\$1,125	\$7,291
2,000 - 2,999	41	2	43.7%	\$4,500	0.0%	\$560	\$1,690	\$2,250	\$932
3,000 - ,3999	14	1	44.0%	\$3,899	0.0%	\$0	\$3,899	\$3,899	\$0
4,000 - 4,999	4	1	44.3%	\$4,874	0.0%	\$0	\$4,874	\$4,874	\$6,440
5,000 - 5,999	32	5	45.7%	\$25,000	0.0%	\$610	\$4,390	\$5,000	\$212
6,000 - 6,999	13	1	46.0%	\$6,300	0.1%	\$6,300	\$0	\$6,300	\$0
7,000 - 7,999	14	2	46.5%	\$14,638	0.1%	\$2,292	\$5,028	\$7,319	\$1,697
10,000 - 19,999	27	9	49.0%	\$112,424	0.2%	\$4,323	\$8,168	\$12,492	\$26,855
20,000 - 29,999	37	15	53.2%	\$342,666	0.5%	\$7,484	\$15,361	\$22,844	\$56,643
30,000 - 39,999	63	2	53.8%	\$64,000	0.6%	\$32,000	\$0	\$32,000	\$203,362
40,000 - 49,999	59	11	56.8%	\$466,032	1.1%	\$17,758	\$24,609	\$42,367	\$52,766
50,000 - 59,999	40	8	59.1%	\$402,500	1.5%	\$28,041	\$22,271	\$50,313	\$32,637
60,000 - 69,999	74	2	59.6%	\$125,000	1.6%	\$16,800	\$45,700	\$62,500	\$36,721
70,000 - 79,999	49	10	62.4%	\$741,500	2.3%	\$47,110	\$27,040	\$74,150	\$73,960
80,000 - 89,999	20	4	63.5%	\$333,333	2.7%	\$16,250	\$67,083	\$83,333	\$11,411
90,000 - 99,999	46	3	64.4%	\$278,500	2.9%	\$35,633	\$57,200	\$92,833	\$44,786
100,000 -199,999	43	28	72.1%	\$3,777,775	6.7%	\$61,352	\$67,765	\$134,921	\$83,360
200,000 - 299,999	41	26	79.4%	\$5,875,984	12.7%	\$86,982	\$139,018	\$225,999	\$87,055
300,000 - 399,999	39	12	82.7%	\$4,060,222	16.7%	\$115,819	\$222,533	\$338,352	\$148,007
400,000 - 499,999	88	11	85.8%	\$4,825,000	21.6%	\$126,182	\$312,455	\$438,636	\$347,689
500,000 - 999,999	47	28	93.6%	\$19,388,958	41.1%	\$313,781	\$378,682	\$692,463	\$189,310
1,000,000 - 1,999,999	45	12	96.9%	\$16,815,499	58.0%	\$825,604	\$575,687	\$1,401,292	\$326,991
2,000,000 - 2,999,999	69	3	97.8%	\$6,900,000	64.9%	\$1,066,667	\$1,233,333	\$2,300,000	\$601,927
3,000,000 - 3,999,999	106	3	98.6%	\$10,147,594	75.1%	\$2,145,833	\$1,236,698	\$3,382,531	\$537,283
Over 4,000,000	50	5	100.0%	\$24,775,000	100.0%	\$2,446,084	\$1,721,416	\$4,955,000	\$230,217
Total	45	359	.	\$99,495,696	.	\$135,507	\$130,219	\$277,147	\$90,756
Total (Paid Only)	46	208	.	\$99,495,696	.	\$233,880	\$224,754	\$478,345	\$131,567
None	43	151	42.1%	\$0	0.0%	\$0	\$0	\$0	\$34,540

Section III

Average Payments by Injury Severity And Lapsed Time to Disposition

This section illustrates the paid claim count, the average paid indemnity (economic + non-economic), the percent change of paid claims, and the percent change of average paid indemnity by bodily injury severity for the past four years. These tables are displayed by the major business classifications and by the month from incident to disposition for all medical care providers, physicians and hospitals. Severity categories are defined as follows:

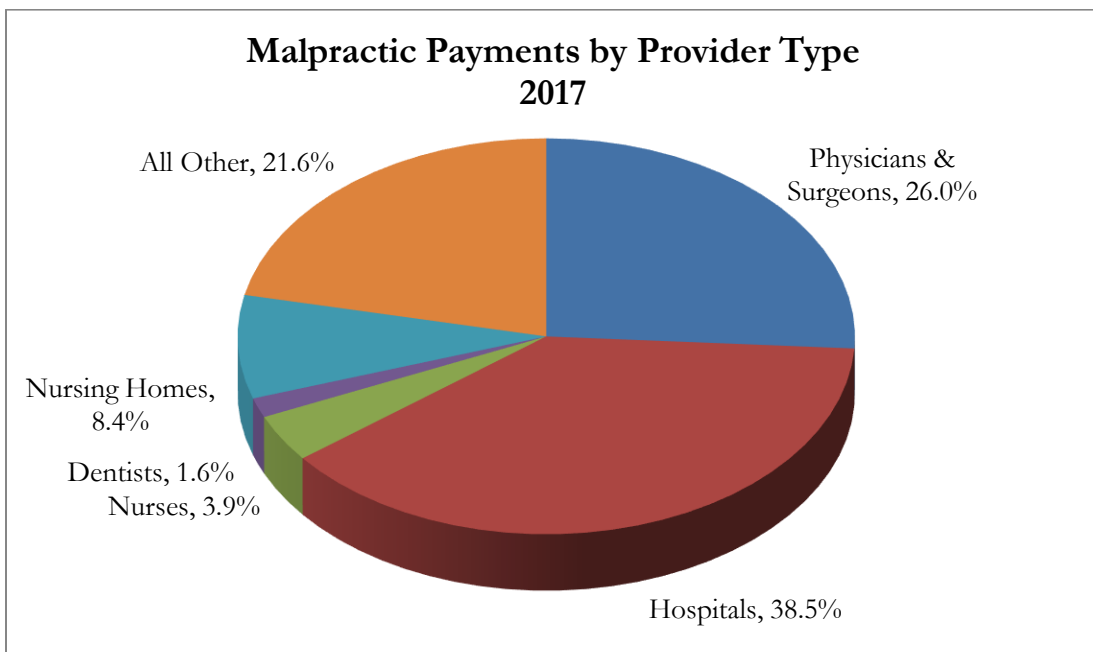
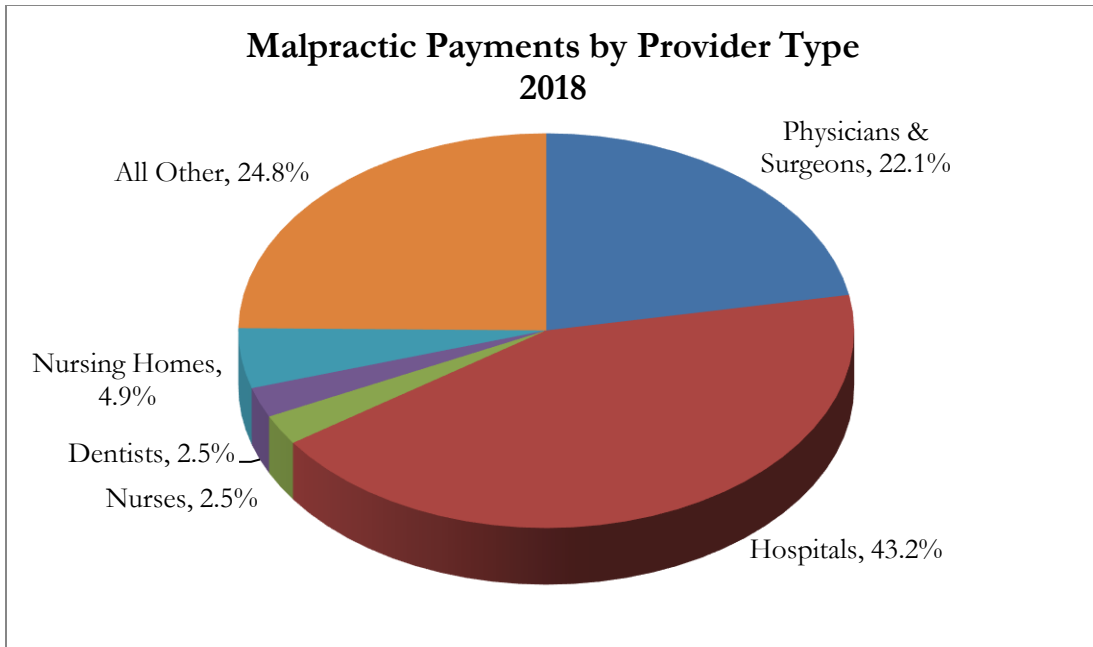
Temporary Injuries (1 – 4)

1. Emotional only - fright, no physical damage. Examples include breach of patient confidentiality, misdiagnosing a healthy patient with a condition, inappropriate legal or ethical behavior.
2. Insignificant – Lacerations, minor contusions, rash. No delay in recovery.
3. Minor – Infections, misset fracture, fall in hospital. Recovery is delayed.
4. Major – burns, surgical material retained, drug side-effect, temporary brain damage. Recovery delayed.

Permanent Non-Fatal Injuries (5 – 8)

5. Minor – Loss of fingers, damage to internal organs. Injuries are non-disabling.
6. Significant – Deafness, loss of limb, loss of eye, one kidney or lung
7. Major – Paraplegia, blindness, loss of two limbs, significant brain damage
8. Grave – quadriplegia, severe brain damage, life-long care or fatal prognosis.

Fatalities – 9

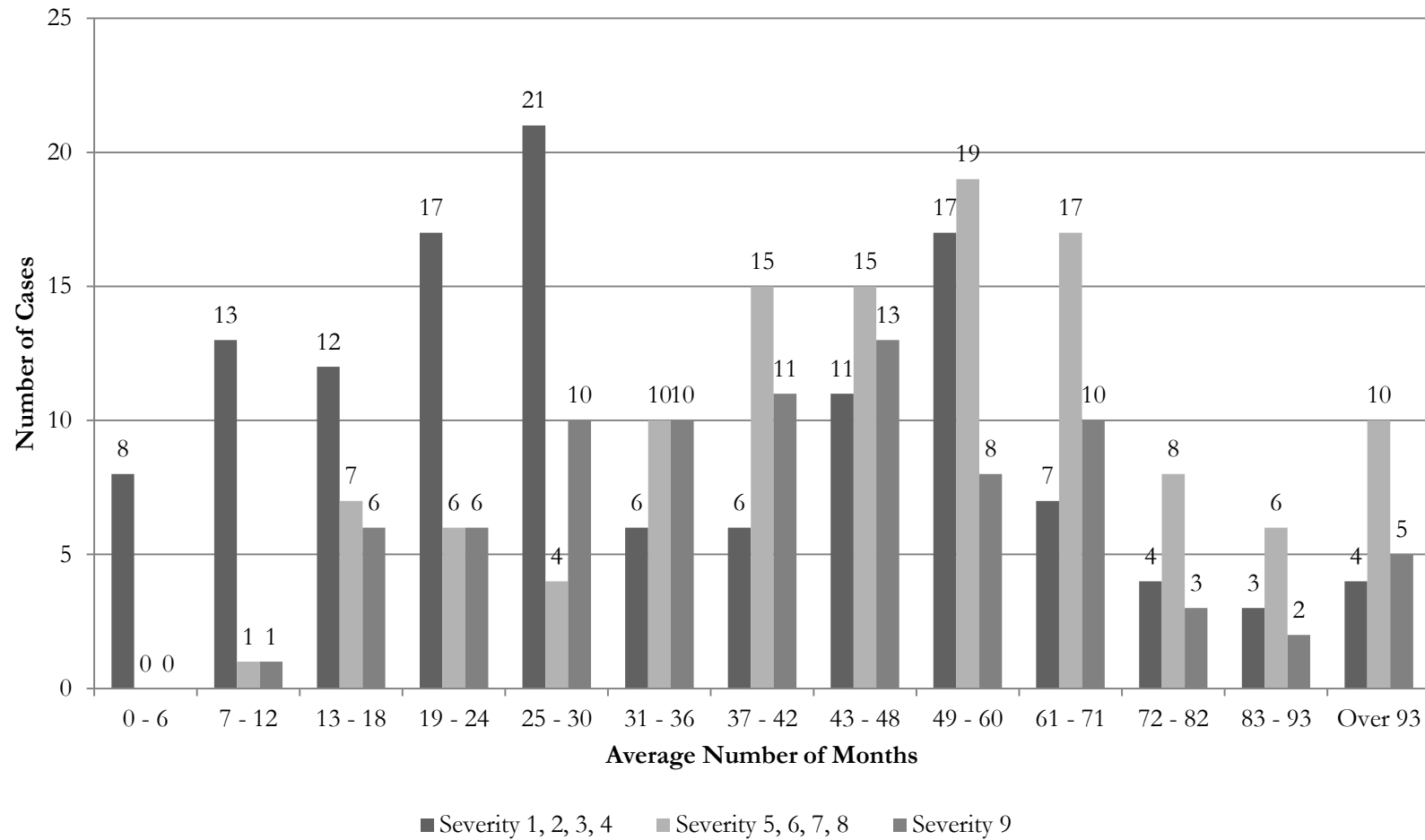


Claims by Provider Type												
	2018		2017 – 2018		2017		2016 – 2017		2016		2015 - 2016	
			%	%			%	%			%	%
Profession Type	Paid Claims	Average Indemnity	Change, Paid Claims	Change, Average Indemnity	Paid Claims	Average Indemnity	Change, Paid Claims	Change, Average Indemnity	Paid Claims	Average Indemnity	Change, Paid Claims	Change, Average Indemnity
Severity 1, 2, 3, 4 (Temporary Injuries)												
Chiropractors	1	\$2,500	-75.0%	-97.3%	4	\$93,000	0.0%	-6.6%	4	\$99,625	300.0%	99.3%
Clinics & Corporations	25	\$316,370	-28.6%	154.8%	35	\$124,170	-7.9%	-6.4%	38	\$132,679	5.6%	93.6%
Dentists	7	\$30,968	0.0%	-48.5%	7	\$60,146	-50.0%	-62.0%	14	\$158,107	-6.7%	533.3%
Hospitals	73	\$149,465	7.4%	16.1%	68	\$128,696	-9.3%	17.0%	75	\$109,994	11.9%	105.5%
Nurses	2	\$207,375	-60.0%	31.6%	5	\$157,608	-16.7%	-46.9%	6	\$296,667	-40.0%	435.0%
Nursing Homes	6	\$97,292	-57.1%	-14.8%	14	\$114,250	250.0%	-2.1%	4	\$116,656	-60.0%	47.9%
Optometrists	0	\$0	.	.	0	\$0	.	.	0	\$0	.	.
Pharmacies	3	\$98,333	-40.0%	1114.0%	5	\$8,100	-68.8%	-62.6%	16	\$21,638	6.7%	-36.0%
Physicians & Surgeons	20	\$668,625	-28.6%	254.6%	28	\$188,571	3.7%	-12.9%	27	\$216,453	-3.6%	-20.8%
Podiatrist/Chiroprodist	1	\$75,000	0.0%	87.5%	1	\$40,000	-50.0%	-40.7%	2	\$67,500	-50.0%	-89.3%
Subtotal	138	\$244,786	-17.4%	88.9%	167	\$129,571	-10.2%	-1.5%	186	\$131,588	0.0%	32.2%
Severity 5, 6, 7, 8 (Permanent Injuries)												
Chiropractors	3	\$366,667	200.0%	319.0%	1	\$87,500	-66.7%	-49.5%	3	\$173,333	200.0%	-37.0%
Clinics & Corporations	33	\$584,165	22.2%	6.5%	27	\$548,751	-35.7%	-32.0%	42	\$806,487	-10.6%	33.5%
Dentists	3	\$40,000	.	.	0	\$0	-100.0%	-100.0%	2	\$10,750	-50.0%	-92.7%
Hospitals	60	\$811,382	13.2%	34.3%	53	\$603,981	6.0%	-14.8%	50	\$709,258	-15.3%	57.3%
Nurses	4	\$258,750	-50.0%	26.3%	8	\$204,916	60.0%	-82.3%	5	\$1,160,000	-28.6%	203.6%
Nursing Homes	0	\$0	-100.0%	-100.0%	4	\$194,375	0.0%	136.0%	4	\$82,375	100.0%	-63.4%
Optometrists	0	\$0	.	.	0	\$0	.	.	0	\$0	-100.0%	-100.0%
Pharmacies	0	\$0	.	.	0	\$0	.	.	0	\$0	-100.0%	-100.0%
Physicians & Surgeons	50	\$507,383	-5.7%	-7.6%	53	\$549,046	-24.3%	-25.1%	70	\$732,850	45.8%	52.6%
Podiatrist/Chiroprodist	4	\$241,987	300.0%	61.3%	1	\$150,000	.	.	0	\$0	-100.0%	-100.0%
Subtotal	157	\$614,984	6.8%	15.0%	147	\$534,565	-16.5%	-26.1%	176	\$723,328	1.1%	48.8%

Claims by Provider Type												
	2018		2017 – 2018		2017		2016 – 2017		2016		2015 - 2016	
	Paid	Average	%	%	Paid	Average	%	%	Paid	Average	%	%
Profession Type	Claims	Indemnity	Change, Paid Claims	Change, Average Indemnity	Claims	Indemnity	Change, Paid Claims	Change, Average Indemnity	Claims	Indemnity	Change, Paid Claims	Change, Average Indemnity
Severity 9 (Fatality)												
Chiropractors	0	\$0	.	.	0	\$0	.	.	0	\$0	.	.
Clinics & Corporations	30	\$248,498	42.9%	23.9%	21	\$200,619	-8.7%	-7.5%	23	\$216,978	-30.3%	21.1%
Dentists	0	\$0	.	.	0	\$0	-100.0%	-100.0%	2	\$875,000	.	.
Hospitals	43	\$355,019	-10.4%	-2.8%	48	\$365,410	-4.0%	83.7%	50	\$198,940	16.3%	-8.1%
Nurses	4	\$146,250	0.0%	-55.6%	4	\$329,277	-55.6%	314.5%	9	\$79,445	125.0%	-66.9%
Nursing Homes	14	\$249,643	-26.3%	-5.1%	19	\$262,974	11.8%	70.4%	17	\$154,331	13.3%	9.2%
Pharmacies	1	\$25,000	.	.	0	\$0	.	.	0	\$0	-100.0%	-100.0%
Physicians & Surgeons	20	\$356,976	-39.4%	40.2%	33	\$254,566	-21.4%	-38.9%	42	\$416,798	-8.7%	74.0%
Podiatrist/Chiropracist	0	\$0	.	.	0	\$0	.	.	0	\$0	.	.
Subtotal	112	\$303,261	-10.4%	4.0%	125	\$291,736	-12.6%	11.2%	143	\$262,459	0.0%	24.5%

Lapsed Months from Incident to Disposition

2018 Paid Incidents - All Cases



Average Indemnity by Injury Severity (1 to 9 Scale) and Months to Disposition All Cases												
	2018		2017 – 2018		2017		2016 – 2017		2016		2015 - 2016	
Months from Injury to Disposition	Paid Claims	Average Indemnity	% Change, Paid Claims	% Change, Average Indemnity	Paid Claims	Average Indemnity	% Change, Paid Claims	% Change, Average Indemnity	Paid Claims	Average Indemnity	% Change, Paid Claims	% Change, Average Indemnity
Severity 1, 2, 3, 4 (Temporary Injuries)												
0 - 6	8	\$5,701	166.7%	-85.8%	3	\$40,277	-72.7%	195.6%	11	\$13,625	83.3%	156.9%
7 - 12	13	\$67,504	0.0%	72.5%	13	\$39,126	-13.3%	60.9%	15	\$24,319	-37.5%	18.4%
13 - 18	12	\$34,585	-33.3%	-55.0%	18	\$76,816	-5.3%	-18.0%	19	\$93,723	-13.6%	170.4%
19 - 24	17	\$103,665	-26.1%	35.6%	23	\$76,451	-20.7%	-34.1%	29	\$115,928	70.6%	103.8%
25 - 30	21	\$207,107	40.0%	19.7%	15	\$172,967	-6.3%	28.0%	16	\$135,099	-20.0%	3.8%
31 - 36	6	\$1,671,667	-62.5%	1079.3%	16	\$141,751	77.8%	-38.2%	9	\$229,444	12.5%	-49.5%
37 - 42	6	\$299,125	-62.5%	20.5%	16	\$248,219	77.8%	-10.5%	9	\$277,301	-43.8%	43.5%
43 - 48	11	\$106,264	-15.4%	-44.3%	13	\$190,641	18.2%	-22.4%	11	\$245,682	-15.4%	54.7%
48 - 60	17	\$315,623	0.0%	91.7%	17	\$164,677	-5.6%	-18.7%	18	\$202,622	38.5%	119.3%
61 - 71	7	\$792,143	-22.2%	268.8%	9	\$214,778	-10.0%	-42.1%	10	\$371,100	66.7%	77.8%
72 - 82	4	\$256,250	100.0%	192.9%	2	\$87,500	-77.8%	-20.9%	9	\$110,565	80.0%	132.5%
83 - 93	3	\$209,667	200.0%	424.2%	1	\$40,000	0.0%	33.3%	1	\$30,000	-66.7%	-18.0%
94 - 104	1	\$132,500	-50.0%	17.8%	2	\$112,500	100.0%	1025.0%	1	\$10,000	-66.7%	-90.8%
105 - 115	1	\$50,000	0.0%	-94.3%	1	\$883,000	.	.	0	\$0	-100.0%	-100.0%
116 - 126	0	\$0	.	.	0	\$0	-100.0%	-100.0%	1	\$50,000	-50.0%	-86.7%
127 - 137	0	\$0	.	.	0	\$0	-100.0%	-100.0%	1	\$20,000	.	.
138 - 148	0	\$0	.	.	0	\$0	-100.0%	-100.0%	1	\$435,000	.	.
149 - 159	1	\$25,000	0.0%	-95.0%	1	\$500,000	.	.	0	\$0	-100.0%	-100.0%
160 - 170	0	\$0	.	.	0	\$0	.	.	0	\$0	.	.
171 - 181	0	\$0	.	.	0	\$0	.	.	0	\$0	.	.
182 - 192	0	\$0	.	.	0	\$0	.	.	0	\$0	.	.
193 - 203	0	\$0	.	.	0	\$0	.	.	0	\$0	.	.
204 - 214	0	\$0	.	.	0	\$0	.	.	0	\$0	.	.
Over 225	1	\$565,000	.	.	0	\$0	-100.0%	-100.0%	1	\$495,000	0.0%	160.5%

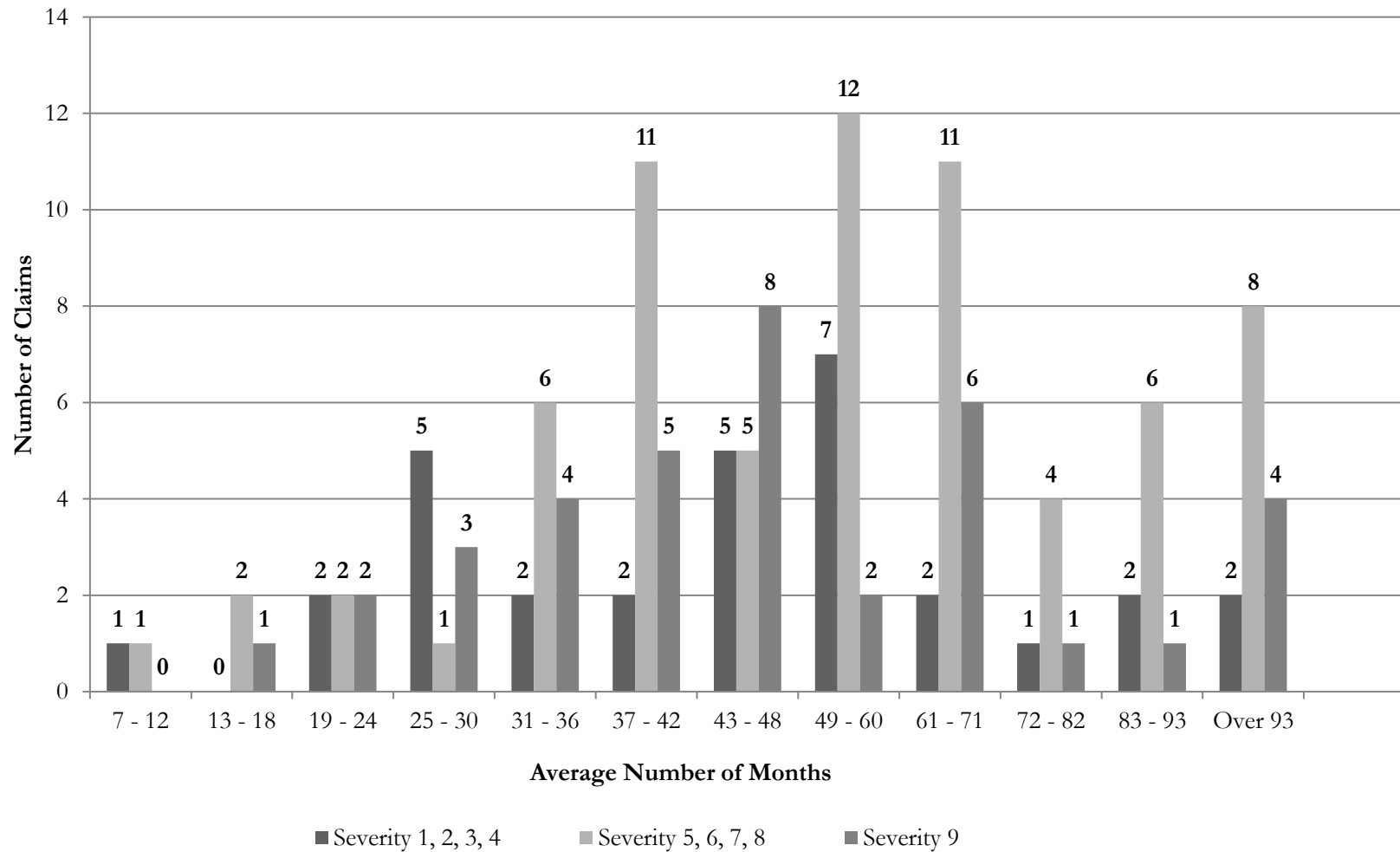
Average Indemnity by Injury Severity (1 to 9 Scale) and Months to Disposition												
All Cases												
	2018		2017 – 2018		2017		2016 – 2017		2016		2015 - 2016	
Months from Injury to Disposition	Paid Claims	Average Indemnity	% Change, Paid Claims	% Change, Average Indemnity	Paid Claims	Average Indemnity	% Change, Paid Claims	% Change, Average Indemnity	Paid Claims	Average Indemnity	% Change, Paid Claims	% Change, Average Indemnity
Subtotal	129	\$261,864	-14.0%	81.5%	150	\$144,256	-7.4%	-4.5%	162	\$151,083	-0.6%	33.0%
Severity 5, 6, 7 & 8 (Permanent Injuries)												
0 - 6	0	\$0	.	.	0	\$0	.	.	0	\$0	.	.
7 - 12	1	\$600,000	-50.0%	1094.0%	2	\$50,250	0.0%	-98.0%	2	\$2,477,500	100.0%	4855.0%
13 - 18	7	\$158,571	250.0%	73.8%	2	\$91,250	-50.0%	-71.7%	4	\$322,500	-20.0%	46.6%
19 - 24	6	\$336,667	20.0%	120.8%	5	\$152,500	-50.0%	-83.9%	10	\$945,330	66.7%	545.6%
25 - 30	4	\$172,500	-42.9%	-76.9%	7	\$748,059	-22.2%	3.5%	9	\$722,556	125.0%	93.2%
31 - 36	10	\$894,541	-9.1%	-33.0%	11	\$1,335,227	-8.3%	201.4%	12	\$442,951	20.0%	-22.9%
37 - 42	15	\$382,000	36.4%	-21.3%	11	\$485,682	-35.3%	-65.9%	17	\$1,423,941	13.3%	21.1%
43 - 48	15	\$1,142,767	-16.7%	33.4%	18	\$856,806	12.5%	115.0%	16	\$398,525	33.3%	-51.0%
48 - 60	19	\$1,562,806	-9.5%	197.1%	21	\$526,031	-22.2%	13.5%	27	\$463,351	22.7%	-27.1%
61 - 71	17	\$940,751	112.5%	66.9%	8	\$563,750	-33.3%	-64.2%	12	\$1,573,976	-52.0%	236.3%
72 - 82	8	\$477,125	100.0%	51.5%	4	\$315,000	-33.3%	-48.7%	6	\$614,167	-14.3%	-22.7%
83 - 93	6	\$701,667	20.0%	-67.8%	5	\$2,182,000	150.0%	-67.9%	2	\$6,787,500	-60.0%	1192.9%
94 - 104	0	\$0	-100.0%	-100.0%	5	\$669,000	.	.	0	\$0	-100.0%	-100.0%
105 - 115	2	\$285,000	0.0%	128.0%	2	\$125,000	.	.	0	\$0	-100.0%	-100.0%
116 - 126	3	\$1,050,000	200.0%	-76.7%	1	\$4,500,000	-50.0%	129.3%	2	\$1,962,500	0.0%	637.1%
127 - 137	1	\$700,000	0.0%	180.0%	1	\$250,000	-50.0%	-91.1%	2	\$2,812,500	.	.
138 - 148	1	\$1,000,000	-50.0%	281.0%	2	\$262,500	100.0%	-95.4%	1	\$5,700,000	.	.
149 - 159	0	\$0	-100.0%	-100.0%	1	\$250,000	0.0%	-95.2%	1	\$5,250,000	0.0%	7976.9%
160 - 170	0	\$0	.	.	0	\$0	.	.	0	\$0	-100.0%	-100.0%
171 - 181	2	\$575,000	.	.	0	\$0	.	.	0	\$0	.	.
182 - 192	0	\$0	.	.	0	\$0	.	.	0	\$0	-100.0%	-100.0%
193 - 203	0	\$0	.	.	0	\$0	.	.	0	\$0	.	.
204 - 214	0	\$0	.	.	0	\$0	.	.	0	\$0	-100.0%	-100.0%

Average Indemnity by Injury Severity (1 to 9 Scale) and Months to Disposition												
All Cases												
	2018		2017 – 2018		2017		2016 – 2017		2016		2015 - 2016	
Months from Injury to Disposition	Paid Claims	Average Indemnity	% Change, Paid Claims	% Change, Average Indemnity	Paid Claims	Average Indemnity	% Change, Paid Claims	% Change, Average Indemnity	Paid Claims	Average Indemnity	% Change, Paid Claims	% Change, Average Indemnity
215 - 225	0	\$0	.	.	0	\$0	.	.	0	\$0	.	.
Over 225	1	\$32,500	.	.	0	\$0	-100.0%	-100.0%	1	\$47,500	.	.
Subtotal	118	\$818,241	11.3%	10.4%	106	\$741,331	-14.5%	-27.8%	124	\$1,026,660	0.0%	50.5%
Severity 9 (Fatal)												
0 - 6	0	\$0	.	.	0	\$0	-100.0%	-100.0%	1	\$600,000	.	.
7 - 12	1	\$126,000	0.0%	129.1%	1	\$55,001	.	.	0	\$0	-100.0%	-100.0%
13 - 18	6	\$314,583	500.0%	214.6%	1	\$100,000	-75.0%	-72.7%	4	\$366,250	-42.9%	39.7%
19 - 24	6	\$468,333	-25.0%	80.0%	8	\$260,208	60.0%	-34.6%	5	\$398,000	-37.5%	40.9%
25 - 30	10	\$323,500	-9.1%	8.2%	11	\$299,016	0.0%	-57.4%	11	\$702,408	-15.4%	322.2%
31 - 36	10	\$488,375	-9.1%	104.3%	11	\$239,000	-31.3%	-33.3%	16	\$358,499	33.3%	36.4%
37 - 42	11	\$268,455	0.0%	37.7%	11	\$195,000	-26.7%	-28.2%	15	\$271,734	7.1%	-28.4%
43 - 48	13	\$407,500	44.4%	27.6%	9	\$319,389	-47.1%	-14.8%	17	\$374,853	70.0%	2.1%
48 - 60	8	\$160,667	-63.6%	-46.7%	22	\$301,543	69.2%	145.4%	13	\$122,857	-43.5%	-51.7%
61 - 71	10	\$830,877	-23.1%	79.7%	13	\$462,427	8.3%	112.2%	12	\$217,917	9.1%	18.9%
72 - 82	3	\$230,000	-40.0%	21.7%	5	\$189,000	66.7%	18.1%	3	\$160,000	-50.0%	-25.5%
83 - 93	2	\$395,000	-33.3%	15.6%	3	\$341,667	50.0%	217.8%	2	\$107,500	100.0%	258.3%
94 - 104	3	\$424,479	200.0%	112.2%	1	\$200,000	-87.5%	-18.6%	8	\$245,625	166.7%	67.5%
105 - 115	1	\$250,000	0.0%	104.7%	1	\$122,106	.	.	0	\$0	.	.
116 - 126	1	\$175,000	-50.0%	-95.7%	2	\$4,027,510	0.0%	1202.3%	2	\$309,250	100.0%	341.8%
127 - 137	0	\$0	.	.	0	\$0	-100.0%	-100.0%	1	\$2,000,000	.	.
138 - 148	0	\$0	-100.0%	-100.0%	1	\$300,000	0.0%	300.0%	1	\$75,000	.	.
149 - 159	0	\$0	.	.	0	\$0	.	.	0	\$0	.	.
160 - 170	0	\$0	.	.	0	\$0	.	.	0	\$0	.	.
171 - 181	0	\$0	.	.	0	\$0	.	.	0	\$0	.	.
182 - 192	0	\$0	.	.	0	\$0	.	.	0	\$0	.	.

Average Indemnity by Injury Severity (1 to 9 Scale) and Months to Disposition All Cases												
	2018		2017 – 2018		2017		2016 – 2017		2016		2015 - 2016	
Months from Injury to Disposition	Paid Claims	Average Indemnity	% Change, Paid Claims	% Change, Average Indemnity	Paid Claims	Average Indemnity	% Change, Paid Claims	% Change, Average Indemnity	Paid Claims	Average Indemnity	% Change, Paid Claims	% Change, Average Indemnity
193 - 203	0	\$0	.	.	0	\$0	.	.	0	\$0	.	.
204 -214	0	\$0	.	.	0	\$0	.	.	0	\$0	.	.
Over 225	0	\$0	.	.	0	\$0	.	.	0	\$0	.	.
Subtotal	85	\$399,592	-15.0%	9.6%	100	\$364,670	-9.9%	7.9%	111	\$338,123	0.0%	24.5%

Lapsed Months from Incident to Disposition

2018 Paid Claims Involving At Least One Physician or Surgeon



Average Indemnity by Bodily Injury Level and Disposition Time Cases Involving At Least One Physician or Surgeon												
	2018		2017-2018		2017		2016-2017		2016		2015-2016	
Months from Injury to Disposition	Paid Claims	Average Indemnity	% Change, Paid Claims	% Change, Average Indemnity	Paid Claims	Average Indemnity	% Change, Paid Claims	% Change, Average Indemnity	Paid Claims	Average Indemnity	% Change, Paid Claims	% Change, Average Indemnity
Severity 1, 2, 3, 4 (Temporary Injuries)												
0 - 6	0	\$0	.	.	0	\$0	.	.	0	\$0	.	.
7 - 12	1	\$350,000	-50.0%	133.3%	2	\$150,000	0.0%	559.3%	2	\$22,750	-33.3%	25.7%
13 - 18	0	\$0	-100.0%	-100.0%	2	\$237,500	-33.3%	39.1%	3	\$170,697	50.0%	1248.0%
19 - 24	2	\$23,750	-33.3%	-53.3%	3	\$50,833	-40.0%	-65.7%	5	\$148,320	400.0%	394.4%
25 - 30	5	\$656,000	0.0%	843.9%	5	\$69,500	25.0%	-79.1%	4	\$332,813	-33.3%	54.5%
31 - 36	2	\$4,577,500	-50.0%	3507.9%	4	\$126,875	0.0%	-71.2%	4	\$440,000	0.0%	44.6%
37 - 42	2	\$761,250	-50.0%	379.5%	4	\$158,750	0.0%	-69.2%	4	\$514,834	-20.0%	32.0%
43 - 48	5	\$79,500	-16.7%	-76.3%	6	\$335,000	0.0%	33.3%	6	\$251,250	50.0%	17.9%
48 - 60	7	\$166,228	-12.5%	-21.7%	8	\$212,188	14.3%	63.9%	7	\$129,429	40.0%	-29.3%
61 - 71	2	\$165,000	-60.0%	-48.8%	5	\$322,500	25.0%	-31.7%	4	\$471,875	33.3%	24.2%
72 - 82	1	\$600,000	-50.0%	585.7%	2	\$87,500	0.0%	20.7%	2	\$72,500	.	.
83 - 93	2	\$312,500	100.0%	681.3%	1	\$40,000	0.0%	33.3%	1	\$30,000	0.0%	200.0%
94 - 104	0	\$0	-100.0%	-100.0%	1	\$200,000	.	.	0	\$0	-100.0%	-100.0%
105 - 115	0	\$0	.	.	0	\$0	.	.	0	\$0	-100.0%	-100.0%
116 - 126	0	\$0	.	.	0	\$0	-100.0%	-100.0%	1	\$50,000	-50.0%	-86.7%
127 - 137	0	\$0	.	.	0	\$0	.	.	0	\$0	.	.
138 - 148	0	\$0	.	.	0	\$0	-100.0%	-100.0%	1	\$435,000	.	.
149 - 159	1	\$25,000	0.0%	-95.0%	1	\$500,000	.	.	0	\$0	.	.
160 - 170	0	\$0	.	.	0	\$0	.	.	0	\$0	.	.
171 - 181	0	\$0	.	.	0	\$0	.	.	0	\$0	.	.
182 - 192	0	\$0	.	.	0	\$0	.	.	0	\$0	.	.
193 - 203	0	\$0	.	.	0	\$0	.	.	0	\$0	.	.

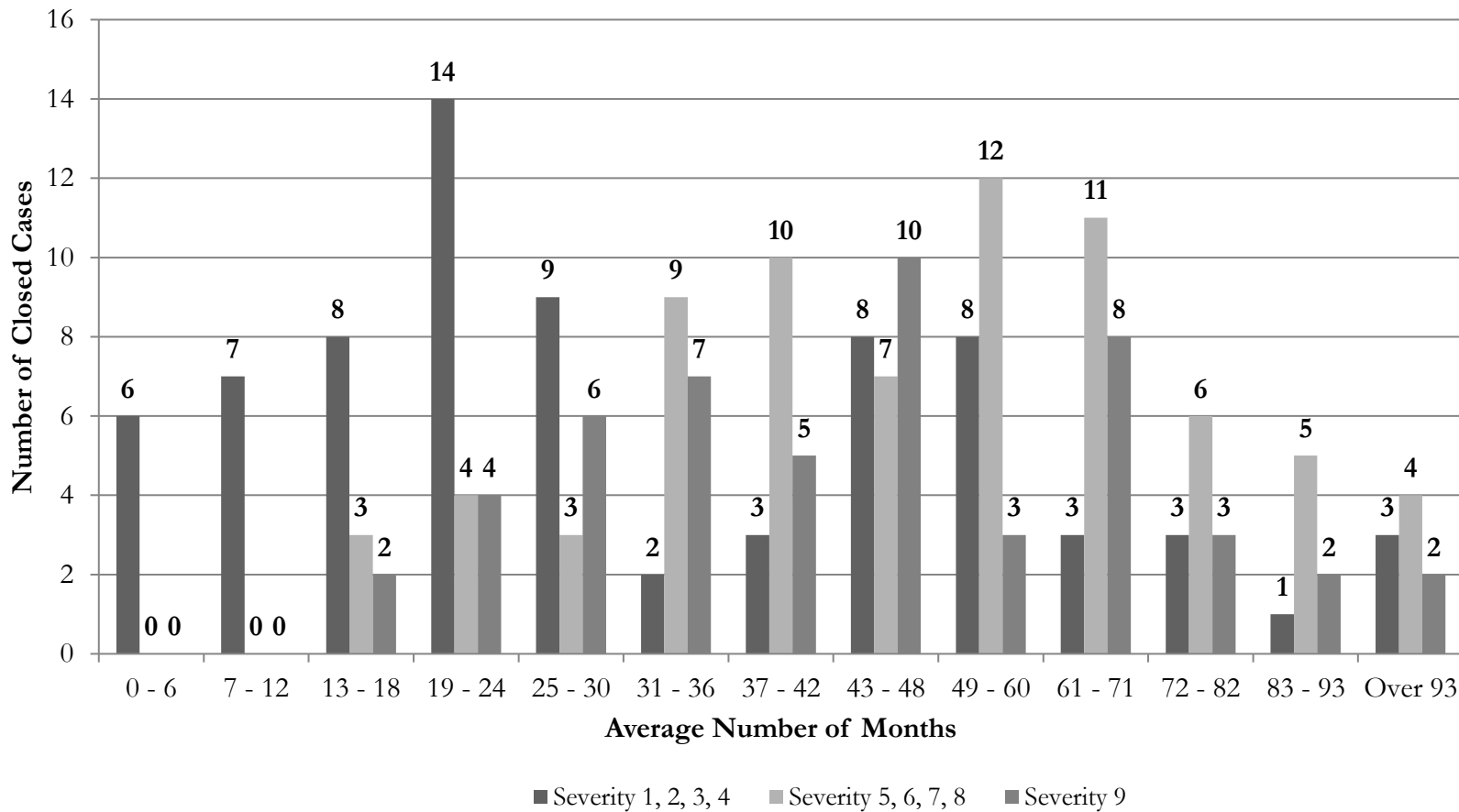
Average Indemnity by Bodily Injury Level and Disposition Time Cases Involving At Least One Physician or Surgeon												
	2018		2017-2018		2017		2016-2017		2016		2015-2016	
Months from Injury to Disposition	Paid Claims	Average Indemnity	% Change, Paid Claims	% Change, Average Indemnity	Paid Claims	Average Indemnity	% Change, Paid Claims	% Change, Average Indemnity	Paid Claims	Average Indemnity	% Change, Paid Claims	% Change, Average Indemnity
204 - 214	0	\$0	.	.	0	\$0	.	.	0	\$0	.	.
Over 225	1	\$565,000	.	.	0	\$0	-100.0%	-100.0%	1	\$495,000	.	.
Subtotal	31	\$582,616	-29.5%	196.3%	44	\$196,648	-2.2%	-25.7%	45	\$264,573	18.4%	13.9%
Severity 5, 6, 7, 8 (Permanent Injuries)												
7 - 12	1	\$600,000	.	.	0	\$0	.	.	0	\$0	.	.
13 - 18	2	\$262,500	.	.	0	\$0	-100.0%	-100.0%	2	\$620,000	0.0%	376.9%
19 - 24	2	\$725,000	0.0%	157.8%	2	\$281,250	-60.0%	-83.9%	5	\$1,745,000	.	.
25 - 30	1	\$337,500	-50.0%	-84.1%	2	\$2,125,705	-50.0%	41.3%	4	\$1,503,875	33.3%	221.8%
31 - 36	6	\$950,070	0.0%	-26.7%	6	\$1,295,833	-25.0%	174.3%	8	\$472,500	60.0%	-44.2%
37 - 42	11	\$423,182	83.3%	-37.7%	6	\$679,083	-60.0%	-54.3%	15	\$1,486,667	50.0%	-9.3%
43 - 48	5	\$1,163,800	-61.5%	29.1%	13	\$901,731	-13.3%	124.4%	15	\$401,760	200.0%	-27.3%
48 - 60	12	\$1,885,692	-29.4%	212.9%	17	\$602,627	-22.7%	15.2%	22	\$523,272	57.1%	-2.2%
61 - 71	11	\$814,260	57.1%	30.7%	7	\$622,857	-30.0%	-65.4%	10	\$1,802,009	-28.6%	483.7%
72 - 82	4	\$568,750	33.3%	62.5%	3	\$350,000	0.0%	-62.5%	3	\$933,333	-40.0%	-12.2%
83 - 93	6	\$701,667	50.0%	-73.7%	4	\$2,671,250	100.0%	-60.6%	2	\$6,787,500	-50.0%	1570.8%
94 - 104	0	\$0	-100.0%	-100.0%	5	\$669,000	.	.	0	\$0	-100.0%	-100.0%
105 - 115	2	\$285,000	100.0%	185.0%	1	\$100,000	.	.	0	\$0	-100.0%	-100.0%
116 - 126	3	\$1,050,000	.	.	0	\$0	-100.0%	-100.0%	2	\$1,962,500	.	.
127 - 137	0	\$0	-100.0%	-100.0%	1	\$250,000	.	.	0	\$0	.	.
138 - 148	1	\$1,000,000	0.0%	100.0%	1	\$500,000	0.0%	-91.2%	1	\$5,700,000	.	.
149 - 159	0	\$0	-100.0%	-100.0%	1	\$250,000	0.0%	-95.2%	1	\$5,250,000	.	.
160 - 170	0	\$0	.	.	0	\$0	.	.	0	\$0	.	.
171 - 181	2	\$575,000	.	.	0	\$0	.	.	0	\$0	.	.
182 - 192	0	\$0	.	.	0	\$0	.	.	0	\$0	.	.
193 - 203	0	\$0	.	.	0	\$0	.	.	0	\$0	.	.

Average Indemnity by Bodily Injury Level and Disposition Time Cases Involving At Least One Physician or Surgeon												
	2018		2017-2018		2017		2016-2017		2016		2015-2016	
Months from Injury to Disposition	Paid Claims	Average Indemnity	% Change, Paid Claims	% Change, Average Indemnity	Paid Claims	Average Indemnity	% Change, Paid Claims	% Change, Average Indemnity	Paid Claims	Average Indemnity	% Change, Paid Claims	% Change, Average Indemnity
204 - 214	0	\$0	.	.	0	\$0	.	.	0	\$0	.	.
215 - 225	0	\$0	.	.	0	\$0	.	.	0	\$0	.	.
Over 225	0	\$0	.	.	0	\$0	.	.	0	\$0	.	.
Subtotal	69	\$913,436	0.0%	6.5%	69	\$857,544	-23.3%	-29.1%	90	\$1,209,655	36.4%	46.3%
Severity 9 (Fatalities)												
0 - 6	0	\$0	.	.	0	\$0	.	.	0	\$0	.	.
7 - 12	0	\$0	.	.	0	\$0	.	.	0	\$0	-100.0%	-100.0%
13 - 18	1	\$400,000	.	.	0	\$0	-100.0%	-100.0%	1	\$750,000	.	.
19 - 24	2	\$310,000	.	.	0	\$0	-100.0%	-100.0%	2	\$140,000	0.0%	-74.2%
25 - 30	3	\$500,000	-40.0%	82.5%	5	\$274,034	66.7%	-85.3%	3	\$1,863,333	-40.0%	834.3%
31 - 36	4	\$320,938	-33.3%	-5.8%	6	\$340,667	0.0%	-51.1%	6	\$697,083	-14.3%	124.6%
37 - 42	5	\$290,600	66.7%	145.6%	3	\$118,333	-72.7%	-60.1%	11	\$296,455	37.5%	-32.8%
43 - 48	8	\$260,313	166.7%	73.7%	3	\$149,833	-66.7%	-68.0%	9	\$467,778	50.0%	-3.1%
48 - 60	2	\$100,000	-81.8%	-51.2%	11	\$204,903	175.0%	22.9%	4	\$166,750	-76.5%	-37.4%
61 - 71	6	\$1,173,128	-33.3%	247.7%	9	\$337,394	12.5%	24.4%	8	\$271,250	33.3%	68.8%
72 - 82	1	\$290,000	-50.0%	2.7%	2	\$282,500	100.0%	841.7%	1	\$30,000	-75.0%	-88.5%
83 - 93	1	\$5,000	-66.7%	-98.5%	3	\$341,667	50.0%	217.8%	2	\$107,500	.	.
94 - 104	3	\$424,479	200.0%	112.2%	1	\$200,000	-83.3%	-33.3%	6	\$300,000	500.0%	140.0%
105 - 115	1	\$250,000	0.0%	104.7%	1	\$122,106	.	.	0	\$0	.	.
116 - 126	0	\$0	-100.0%	-100.0%	2	\$4,027,510	100.0%	1855.1%	1	\$206,000	0.0%	194.3%
127 - 137	0	\$0	.	.	0	\$0	-100.0%	-100.0%	1	\$2,000,000	.	.
138 - 148	0	\$0	-100.0%	-100.0%	1	\$300,000	0.0%	300.0%	1	\$75,000	.	.
149 - 159	0	\$0	.	.	0	\$0	.	.	0	\$0	.	.
160 - 170	0	\$0	.	.	0	\$0	.	.	0	\$0	.	.
171 - 181	0	\$0	.	.	0	\$0	.	.	0	\$0	.	.

Average Indemnity by Bodily Injury Level and Disposition Time Cases Involving At Least One Physician or Surgeon												
	2018		2017-2018		2017		2016-2017		2016		2015-2016	
Months from Injury to Disposition	Paid Claims	Average Indemnity	% Change, Paid Claims	% Change, Average Indemnity	Paid Claims	Average Indemnity	% Change, Paid Claims	% Change, Average Indemnity	Paid Claims	Average Indemnity	% Change, Paid Claims	% Change, Average Indemnity
182 - 192	0	0	.	.	0	0	.	.	0	0	.	.
193 - 203	0	0	.	.	0	0	.	.	0	0	.	.
204 -214	0	0	.	.	0	0	.	.	0	0	.	.
Over 225	0	0	.	.	0	0	.	.	0	0	.	.
Subtotal	37	\$443,147	-21.3%	5.3%	47	\$420,772	-16.1%	-7.4%	56	\$454,223	-3.4%	37.9%

Lapsed Months from Incident to Disposition

2018 Paid Claims, Cases Involving At Least One Hospital



Average Indemnity by Bodily Injury Level and Disposition Time Cases Involving At Least One Hospital												
2018			2017 - 2018, % Change		2017		2016 - 2017, % Change		2016		2015 - 2016, % Change	
Months from Injury to Disposition	Paid Claims	Average Indemnity	Paid Claims	Average Indemnity	Paid Claims	Average Indemnity	Paid Claims	Average Indemnity	Paid Claims	Average Indemnity	Paid Claims	Average Indemnity
Severity 1, 2, 3, 4 (Temporary)												
0 - 6	6	\$3,018	200.0%	-74.1%	2	\$11,666	-66.7%	-48.9%	6	\$22,812	100.0%	208.5%
7 - 12	7	\$54,650	40.0%	354.4%	5	\$12,027	-50.0%	-63.7%	10	\$33,154	-16.7%	41.8%
13 - 18	8	\$39,688	-33.3%	-55.5%	12	\$89,109	-7.7%	-32.7%	13	\$132,463	-27.8%	254.8%
19 - 24	14	\$101,058	133.3%	-10.7%	6	\$113,222	-33.3%	-22.3%	9	\$145,655	0.0%	137.7%
25 - 30	9	\$271,389	-18.2%	27.3%	11	\$213,136	22.2%	11.3%	9	\$191,565	28.6%	85.4%
31 - 36	2	\$275,000	-60.0%	254.8%	5	\$77,500	66.7%	-81.3%	3	\$415,000	50.0%	848.6%
37 - 42	3	\$162,667	-62.5%	-27.4%	8	\$223,938	33.3%	-25.7%	6	\$301,285	100.0%	327.4%
43 - 48	8	\$101,425	100.0%	55.8%	4	\$65,083	-20.0%	-80.9%	5	\$341,000	-37.5%	48.6%
48 - 60	8	\$295,762	-33.3%	84.9%	12	\$159,958	200.0%	1030.5%	4	\$14,150	100.0%	-92.1%
61 - 71	3	\$1,600,000	-40.0%	1059.4%	5	\$138,000	0.0%	-63.0%	5	\$373,000	150.0%	777.6%
72 - 82	3	\$241,667	200.0%	141.7%	1	\$100,000	-85.7%	41.2%	7	\$70,798	133.3%	7.6%
83 - 93	1	\$200,000	0.0%	400.0%	1	\$40,000	.	.	0	\$0	-100.0%	-100.0%
94 - 104	1	\$132,500	-50.0%	17.8%	2	\$112,500	.	.	0	\$0	-100.0%	-100.0%
105 - 115	0	\$0	-100.0%	-100.0%	1	\$883,000	.	.	0	\$0	.	.
116 - 126	0	\$0	.	.	0	\$0	.	.	0	\$0	-100.0%	-100.0%
127 - 137	0	\$0	.	.	0	\$0	-100.0%	-100.0%	1	\$20,000	.	.
138 - 148	0	\$0	.	.	0	\$0	-100.0%	-100.0%	1	\$435,000	.	.
149 - 159	1	\$25,000	.	.	0	\$0	.	.	0	\$0	.	.
160 - 170	0	\$0	.	.	0	\$0	.	.	0	\$0	.	.
171 - 181	0	\$0	.	.	0	\$0	.	.	0	\$0	.	.
182 - 192	0	\$0	.	.	0	\$0	.	.	0	\$0	.	.
204 -214	0	\$0	.	.	0	\$0	.	.	0	\$0	.	.
Over 225	1	\$565,000	.	.	0	\$0	-100.0%	-100.0%	1	\$495,000	.	.

Average Indemnity by Bodily Injury Level and Disposition Time Cases Involving At Least One Hospital												
2018			2017 - 2018, % Change		2017		2016 - 2017, % Change		2016		2015 - 2016, % Change	
Months from Injury to Disposition	Paid Claims	Average Indemnity	Paid Claims	Average Indemnity	Paid Claims	Average Indemnity	Paid Claims	Average Indemnity	Paid Claims	Average Indemnity	Paid Claims	Average Indemnity
Subtotal	75	\$203,180	0.0%	45.5%	75	\$139,646	-6.3%	-16.3%	80	\$166,879	8.1%	136.4%
Severity 5, 6, 7, 8 (Permanent)												
0 - 6	0	\$0	.	.	0	\$0	.	.	0	\$0	.	.
7 - 12	0	\$0	.	.	0	\$0	-100.0%	-100.0%	1	\$4,900,000	.	.
13 - 18	3	\$90,000	200.0%	350.0%	1	\$20,000	-50.0%	-60.0%	2	\$50,000	-33.3%	-82.1%
19 - 24	4	\$255,000	300.0%	218.8%	1	\$80,000	-80.0%	-93.1%	5	\$1,156,660	0.0%	589.7%
25 - 30	3	\$134,167	-50.0%	-83.9%	6	\$830,833	50.0%	-44.8%	4	\$1,505,125	300.0%	1505.5%
31 - 36	9	\$949,490	50.0%	-35.6%	6	\$1,474,583	50.0%	94.0%	4	\$760,125	100.0%	-4.2%
37 - 42	10	\$448,750	0.0%	-11.0%	10	\$504,250	-9.1%	-64.3%	11	\$1,411,364	22.2%	-16.5%
43 - 48	7	\$1,999,286	-22.2%	268.5%	9	\$542,500	-25.0%	82.0%	12	\$298,034	100.0%	-75.7%
48 - 60	12	\$1,935,833	9.1%	165.8%	11	\$728,364	-45.0%	52.5%	20	\$477,524	17.6%	-9.3%
61 - 71	11	\$928,636	175.0%	20.4%	4	\$771,250	-42.9%	-21.0%	7	\$976,817	-56.3%	55.0%
72 - 82	6	\$548,333	500.0%	161.1%	1	\$210,000	-50.0%	-64.7%	2	\$595,000	-33.3%	-61.6%
83 - 93	5	\$442,000	66.7%	-86.0%	3	\$3,161,667	.	.	0	\$0	-100.0%	-100.0%
94 - 104	0	\$0	-100.0%	-100.0%	3	\$1,073,333	.	.	0	\$0	-100.0%	-100.0%
105 - 115	2	\$285,000	.	.	0	\$0	.	.	0	\$0	-100.0%	-100.0%
116 - 126	0	\$0	-100.0%	-100.0%	1	\$4,500,000	-50.0%	129.3%	2	\$1,962,500	100.0%	7750.0%
127 - 137	1	\$700,000	.	.	0	\$0	-100.0%	-100.0%	1	\$3,937,500	.	.
138 - 148	0	\$0	-100.0%	-100.0%	2	\$262,500	.	.	0	\$0	.	.
149 - 159	0	\$0	.	.	0	\$0	-100.0%	-100.0%	1	\$5,250,000	.	.
160 - 170	0	\$0	.	.	0	\$0	.	.	0	\$0	-100.0%	-100.0%
171 - 181	1	\$750,000	.	.	0	\$0	.	.	0	\$0	.	.
182 - 192	0	\$0	.	.	0	\$0	.	.	0	\$0	-100.0%	-100.0%
193 - 203	0	\$0	.	.	0	\$0	.	.	0	\$0	.	.
204 - 214	0	\$0	.	.	0	\$0	.	.	0.0%	\$0	-100.0%	-100.0%

Average Indemnity by Bodily Injury Level and Disposition Time Cases Involving At Least One Hospital												
2018			2017 - 2018, % Change		2017		2016 - 2017, % Change		2016		2015 - 2016, % Change	
Months from Injury to Disposition	Paid Claims	Average Indemnity	Paid Claims	Average Indemnity	Paid Claims	Average Indemnity	Paid Claims	Average Indemnity	Paid Claims	Average Indemnity	Paid Claims	Average Indemnity
215 - 225	0	\$0	.	.	0	\$0	.	.	0	\$0	.	.
Over 225	0	\$0	.	.	0	\$0	-100.0%	-100.0%	1	\$47,500	.	.
Subtotal	74	\$941,695	27.6%	3.3%	58	\$911,974	-20.5%	-4.5%	73	\$954,574	-3.9%	10.9%
Severity 9 (Fatalities)												
0 - 6	0	\$0	.	.	0	\$0	-100.0%	-100.0%	1	\$600,000	.	.
7 - 12	0	\$0	.	.	0	\$0	.	.	0	\$0	-100.0%	-100.0%
13 - 18	2	\$250,000	100.0%	150.0%	1	\$100,000	-66.7%	-58.0%	3	\$238,333	0.0%	17.2%
19 - 24	4	\$615,000	0.0%	115.5%	4	\$285,417	0.0%	-38.6%	4	\$465,000	33.3%	0.2%
25 - 30	6	\$418,333	20.0%	52.7%	5	\$274,034	25.0%	17.2%	4	\$233,750	-20.0%	18.4%
31 - 36	7	\$472,679	0.0%	82.8%	7	\$258,571	-12.5%	19.2%	8	\$216,998	100.0%	32.9%
37 - 42	5	\$295,600	-37.5%	31.4%	8	\$225,000	60.0%	-50.4%	5	\$453,200	0.0%	-0.2%
43 - 48	10	\$426,250	42.9%	23.1%	7	\$346,357	-22.2%	2.3%	9	\$338,611	28.6%	-29.0%
48 - 60	3	\$220,667	-70.0%	-46.7%	10	\$413,775	42.9%	240.0%	7	\$121,714	-50.0%	-42.2%
61 - 71	8	\$1,035,784	100.0%	60.8%	4	\$644,138	-33.3%	209.2%	6	\$208,333	0.0%	-9.0%
72 - 82	3	\$230,000	-25.0%	37.3%	4	\$167,500	100.0%	31.4%	2	\$127,500	-66.7%	-40.6%
83 - 93	2	\$395,000	0.0%	-12.2%	2	\$450,000	100.0%	328.6%	1	\$105,000	.	.
94 - 104	1	\$590,000	.	.	0	\$0	-100.0%	-100.0%	3	\$255,000	50.0%	39.7%
105 - 115	1	\$250,000	.	.	0	\$0	.	.	0	\$0	.	.
116 - 126	0	\$0	-100.0%	-100.0%	1	\$8,000,020	.	.	0	\$0	-100.0%	-100.0%
127 - 137	0	\$0	.	.	0	\$0	-100.0%	-100.0%	1	\$2,000,000	.	.
138 - 148	0	\$0	.	.	0	\$0	-100.0%	-100.0%	1	\$75,000	.	.
149 - 159	0	\$0	.	.	0	\$0	.	.	0	\$0	.	.
160 - 170	0	\$0	.	.	0	\$0	.	.	0	\$0	.	.
171 - 181	0	\$0	.	.	0	\$0	.	.	0	\$0	.	.
182 - 192	0	\$0	.	.	0	\$0	.	.	0	\$0	.	.

Average Indemnity by Bodily Injury Level and Disposition Time Cases Involving At Least One Hospital												
2018			2017 - 2018, % Change		2017		2016 - 2017, % Change		2016		2015 - 2016, % Change	
Months from Injury to Disposition	Paid Claims	Average Indemnity	Paid Claims	Average Indemnity	Paid Claims	Average Indemnity	Paid Claims	Average Indemnity	Paid Claims	Average Indemnity	Paid Claims	Average Indemnity
193 - 203	0	\$0	.	.	0	\$0	.	.	0	\$0	.	.
Over 225	0	\$0	.	.	0	\$0	.	.	0	\$0	.	.
Subtotal	52	\$495,914	-1.9%	5.4%	53	\$470,390	-3.6%	57.2%	55	\$299,300	-5.2%	0.1%

Section IV

Indemnity Analysis by Company

Section IV contains the total number of claims reported to the insurer, total number of closed claims, the number of claims closed with payment, the total indemnity paid (economic + non-economic), then total economic damage paid and the total non-economic damage paid by each company. Self-insured hospitals are reported in aggregate.

Each of the past three years is reported separately, and the companies are listed in descending order by the number of paid claims.

Medical Malpractice Actions by Company, 2018 Sorted by Descending Number of Paid Claims				
Name	Number Reported	Number Closed	Number Paid	Total Indemnity
All Self-Insured Entities	235	295	171	\$98,847,520
Missouri Hospital Plan	90	131	57	\$30,059,872
Norcal Mutual Insurance Company	29	41	10	\$7,280,000
Proassurance Indemnity Company	31	41	5	\$2,234,436
Medical Protective Company	65	39	10	\$2,738,306
Missouri Professionals Mutual-Physicians Professional	12	38	9	\$1,748,398
Medical Liability Alliance	34	30	12	\$5,212,500
Doctors Company An Interins Exchange	42	29	9	\$2,332,500
Columbia Casualty Company	27	22	9	\$2,846,250
Lexington Insurance Company	17	16	0	\$0
Continental Casualty Company	8	16	8	\$967,500
MMIC Insurance	24	13	2	\$637,500
St Lukes Health System Risk Retention Group	16	9	2	\$1,550,000
Medicus Insurance Company	0	9	4	\$1,621,865
American Casualty Company Of Reading Pennsylvania	2	9	4	\$1,069,999
Arch Specialty Insurance Company	15	9	2	\$275,000
NCMIC Insurance Company	6	8	3	\$327,500
National Fire & Marine Insurance Company	12	7	0	\$0
Keystone Mutual Insurance Company	6	6	3	\$425,000
Allied World Surplus Lines Insurance Company	1	6	5	\$492,000
Preferred Physicians Medical Risk Retention Group A	9	6	0	\$0
Capson Physicians Insurance Company	4	5	2	\$70,000
Ironshore Specialty Insurance Company	2	5	4	\$798,500
Kansas Medical Mutual Insurance Company	1	5	3	\$1,550,000
Health Care Industry Liability Reciprocal Insurance	2	4	2	\$350,000
Physicians Insurance Mutual	2	4	3	\$815,000
Pharmacists Mutual Insurance Company	3	4	2	\$285,000
Homeland Insurance Company Of New York	4	4	2	\$345,000
Hudson Specialty Insurance Company	0	4	2	\$5,300,000
Lloyds Of London Syndicate #2001	2	4	2	\$165,000
Zurich American Insurance Company	0	3	2	\$290,000
Allied World Insurance Company	2	3	0	\$0
Proassurance Specialty Insurance Inc	6	2	2	\$375,000
Cincinnati Insurance Company The	4	2	2	\$310,000
Physicians Standard Insurance Company	22	2	1	\$187,500
Missouri Medical Malpractice Joint Underwriting	1	2	2	\$700,000
Massachusetts Bay Insurance Company	0	2	2	\$283,333
Ace American Insurance Company	0	2	2	\$585,000
Evanston Insurance Company	1	2	1	\$75,000
Preferred Professional Insurance Company	4	2	1	\$50,000

Medical Malpractice Actions by Company, 2018 Sorted by Descending Number of Paid Claims				
Name	Number Reported	Number Closed	Number Paid	Total Indemnity
Oms National Insurance Company RRG	4	2	2	\$35,000
Paco Assurance Company	0	1	1	\$775,000
Fortress Insurance Company	0	1	0	\$0
Professional Solutions Insurance Company	7	1	1	\$40,000
Physicians Professional Indemnity Association	0	1	1	\$125,000
Emergency Medicine Risk Retention Group	0	1	1	\$550,000
Orthoforum Insurance Company A Risk Retention Group	0	1	0	\$0
Podiatry Insurance Company Of America	1	1	1	\$75,000
Hudson Excess Insurance Company	2	1	1	\$15,024
Allied World Specialty Insurance Company	0	1	1	\$4,000
National Union Fire Insurance Company Of Pittsburg Pa	1	1	0	\$0
American Alternative Insurance Corporation	1	1	0	\$0
Liberty Insurance Underwriters	1	1	1	\$90,000
Chicago Insurance Company	0	1	1	\$70,000
Steadfast Insurance Company	0	1	1	\$1,944,991
Illinois Union Insurance Company	1	1	0	\$0
Intermed Insurance Company	0	1	1	\$125,000
TDC Specialty Insurance Company	0	1	1	\$15,000
Centennial Casualty Company	2	1	1	\$126,000
Missouri Doctors Mutual Insurance Company	1	0	0	\$0
Cincinnati Specialty Underwriters Insurance Company The	1	0	0	\$0
Coverys Specialty Insurance Company	1	0	0	\$0
Mt Hawley Insurance Company	1	0	0	\$0

Medical Malpractice Actions by Company, 2017 Sorted by Descending Number of Paid Claims				
Name	Number Reported	Number Closed	Number Paid	Total Indemnity
All Self-Insured Entities	296	333	189	\$83,013,976
Missouri Hospital Plan	108	93	32	\$13,150,919
Missouri Professionals Mutual-Physicians Professional	40	63	24	\$3,573,000
Medical Protective Company	61	58	4	\$2,575,000
Norcal Mutual Insurance Company	58	37	8	\$1,185,000
Columbia Casualty Company	38	36	20	\$3,262,371
Proassurance Indemnity Company	36	33	7	\$769,650
Medical Liability Alliance	37	32	10	\$2,190,000
Doctors Company An Interins Exchange	28	28	10	\$4,482,540
Lexington Insurance Company	7	20	4	\$416,500
Continental Casualty Company	20	20	5	\$596,500
MMIC Insurance	9	16	4	\$875,000
American Casualty Company Of Reading Pennsylvania	10	12	4	\$115,750
St Lukes Health System Risk Retention Group	9	11	9	\$1,531,500
Physicians Professional Indemnity Association	0	8	7	\$1,950,000
Medicus Insurance Company	0	8	2	\$1,300,000
Capson Physicians Insurance Company	6	8	4	\$332,500
Preferred Physicians Medical Risk Retention Group A Mutual	10	8	0	\$0
Health Care Industry Liability Reciprocal Insurance Company	4	7	7	\$1,905,000
NCMIC Insurance Company	7	7	5	\$459,500
Professional Solutions Insurance Company	4	6	2	\$520,000
Evanston Insurance Company	2	6	3	\$783,222
Pharmacists Mutual Insurance Company	3	5	3	\$37,750
National Fire & Marine Insurance Company	8	5	0	\$0
Admiral Insurance Company	5	5	0	\$0
Cincinnati Insurance Company The	1	4	1	\$50,000
Missouri Doctors Mutual Insurance Company	10	4	2	\$1,158,688
Galen Insurance Company	0	4	4	\$670,000
Keystone Mutual Insurance Company	7	4	1	\$150,000
Podiatry Insurance Company Of America	3	4	2	\$80,000
Allied World Surplus Lines Insurance Company	2	4	1	\$2,500
Ironshore Specialty Insurance Company	4	4	4	\$700,000
Oms National Insurance Company RRG	3	4	0	\$0
Physicians Insurance Mutual	1	3	1	\$50,000
Steadfast Insurance Company	4	3	3	\$1,437,500
Centennial Casualty Company	2	3	3	\$225,679
Essex Insurance Company	0	3	2	\$335,846
Proassurance Specialty Insurance	2	2	1	\$4,800,000
Paco Assurance Company	1	2	1	\$100,000
Emergency Physicians Insurance Exchange Risk Retention	0	2	1	\$15,000

Medical Malpractice Actions by Company, 2017 Sorted by Descending Number of Paid Claims				
Name	Number Reported	Number Closed	Number Paid	Total Indemnity
Illinois Union Insurance Company	0	2	2	\$72,500
Intermed Insurance Company	0	2	1	\$500,000
Homeland Insurance Company Of New York	4	2	1	\$175,000
Kansas Medical Mutual Insurance Company	2	2	0	\$0
Fortress Insurance Company	3	1	0	\$0
Everest Indemnity Insurance Company	0	1	1	\$250,000
Oceanus Insurance Company RRG	3	1	1	\$250,000
Orthoforum Insurance Company A Risk Retention Group	0	1	1	\$175,000
Missouri Medical Malpractice Joint Underwriting Association	1	1	0	\$0
Allied World Specialty Insurance Company	1	1	0	\$0
National Union Fire Insurance Company Of Pittsburg Pa	3	1	0	\$0
Ace American Insurance Company	0	1	1	\$100,000
Chicago Insurance Company	0	1	1	\$62,106
Landmark American Insurance Company	0	1	1	\$100,000
Preferred Professional Insurance Company	2	1	0	\$0
Hudson Specialty Insurance Company	1	1	0	\$0
Starstone Specialty Insurance Company	0	1	0	\$0
Lloyds Of London Syndicate #2001	1	1	0	\$0
James River Insurance Company	1	0	0	\$0
Hudson Excess Insurance Company	3	0	0	\$0
Liberty Insurance Underwriters Inc	1	0	0	\$0
Arch Specialty Insurance Company	8	0	0	\$0
Massachusetts Bay Insurance Company	1	0	0	\$0
Allied World Insurance Company	4	0	0	\$0
Cincinnati Casualty Company The	1	0	0	\$0
TDC Specialty Insurance Company	1	0	0	\$0
Fair American Insurance And Reinsurance Company	3	0	0	\$0

Medical Malpractice Actions by Company, 2016 Sorted by Descending Number of Paid Claims				
Name	Number Reported	Number Closed	Number Paid	Total Indemnity
All Self-Insured Entities	308	348	197	\$128,784,179
Missouri Hospital Plan	101	116	45	\$11,689,112
Missouri Professionals Mutual-Physicians Professional	66	52	17	\$4,781,007
Medical Protective Company	42	50	7	\$629,000
Doctors Company An Interins Exchange	35	43	4	\$947,500
Columbia Casualty Company	27	33	18	\$1,882,878
Medical Liability Alliance	31	31	18	\$6,748,000
Proassurance Indemnity Company	31	29	5	\$1,912,592
Norcal Mutual Insurance Company	60	26	4	\$898,000
Medicus Insurance Company	1	25	10	\$4,875,000
Lexington Insurance Company	18	22	2	\$30,000
Continental Casualty Company	15	18	3	\$401,500
Pharmacists Mutual Insurance Company	11	17	12	\$216,212
Physicians Professional Indemnity Association	1	15	9	\$742,500
NCMIC Insurance Company	10	12	7	\$918,500
MMIC Insurance	13	12	3	\$830,000
St Lukes Health System Risk Retention Group	11	11	6	\$5,312,500
Capson Physicians Insurance Company	5	8	5	\$1,555,000
National Union Fire Insurance Company Of Pittsburgh PA	4	8	2	\$110,000
American Casualty Company Of Reading Pennsylvania	9	8	5	\$360,001
Homeland Insurance Company Of New York	5	8	5	\$1,325,000
Evanston Insurance Company	6	8	1	\$400,000
Health Care Industry Liability Reciprocal Insurance	2	6	5	\$875,000
Missouri Doctors Mutual Insurance Company	9	6	2	\$606,000
Galen Insurance Company	10	6	5	\$1,640,000
Essex Insurance Company	1	6	3	\$4,175,000
Professional Solutions Insurance Company	4	5	1	\$575,000
Centennial Casualty Company	2	5	3	\$248,409
Ironshore Speciality Insurance Company	3	4	2	\$216,631
Intermed Insurance Company	2	4	1	\$100,000
Oms National Insurance Company RRG	2	4	2	\$2,500,000
Everest Indemnity Insurance Company	0	3	1	\$250,000
Oceanus Insurance Company RRG	1	3	1	\$110,000
Physicians Insurance Mutual	4	3	2	\$900,000
Admiral Insurance Company	3	3	2	\$8,300
Steadfast Insurance Company	7	3	2	\$915,825
Preferred Physicians Medical Risk Retention Group A	9	3	1	\$1,000,000
Proassurance Specialty Insurance	0	2	1	\$500,000
Cincinnati Insurance Company The	4	2	1	\$68,500
National Fire & Marine Insurance Company	3	2	1	\$200,000
Arch Specialty Insurance Company	0	2	0	\$0

Medical Malpractice Actions by Company, 2016 Sorted by Descending Number of Paid Claims				
Name	Number Reported	Number Closed	Number Paid	Total Indemnity
Allied World Surplus Lines Insurance Company	5	2	2	\$175,000
Illinois Union Insurance Company	1	2	2	\$76,250
Hudson Specialty Insurance Company	0	2	0	\$0
Paco Assurance Company	4	1	0	\$0
Fortress Insurance Company	2	1	0	\$0
Emergency Physicians Insurance Exchange Risk Retention	0	1	1	\$1,800,000
Keystone Mutual Insurance Company	2	1	0	\$0
Orthoforum Insurance Company A Risk Retention Group	1	1	0	\$0
Podiatry Insurance Company Of America	2	1	1	\$85,000
Missouri Medical Malpractice Joint Underwriting	2	1	1	\$425,000
Allied World Specialty Insurance Company	3	1	1	\$175,000
American Home Assurance Company	1	1	0	\$0
American Alternative Insurance Corporation	0	1	1	\$225,000
Massachusetts Bay Insurance Company	1	1	1	\$59,999
Ace American Insurance Company	2	1	0	\$0
American Safety Indemnity Company	0	1	1	\$150,000
Atlantic Specialty Insurance Company	0	1	0	\$0
North American Specialty Insurance Company	0	1	0	\$0
Citizens Insurance Company Of America	0	1	1	\$25,000
Kansas Medical Mutual Insurance Company	3	1	1	\$70,000
Fair American Insurance And Reinsurance Company	0	1	0	\$0
Proassurance Casualty Company	1	1	0	\$0
Lloyds Of London Syndicate #2001	4	1	0	\$0
Zurich American Insurance Company	2	0	0	\$0
Axis Surplus Insurance Company	1	0	0	\$0
Landmark American Insurance Company	2	0	0	\$0
Preferred Professional Insurance Company	1	0	0	\$0

Section V

Indemnity Analysis by Professional Specialty

This exhibit contains the total number of claims reported to each insurers, total number of closed claims, the number of claims closed with payment, the total indemnity paid (economic + non-economic), the total economic damage paid and the total non-economic damage paid for each medical specialty.

Data are ranked in descending order by the total number of paid claims.

Data presented in this section is based on each individual / entity with a payment made on their behalf. Data are not aggregated by incident, as in other sections. For example, if a single incident resulted in a payment by both a hospital and physician, each payment will be reported separately rather than added together.

Indemnity by Specialty / Entity Type, 2018 Sorted by Number of Closed Actions				
Specialty	Reported	Closed	Closed with Payment	Total Indemnity
Hospitals	265	358	181	\$76,188,791
Misc. Corporations / Partnership, etc	220	205	54	\$26,233,385
General Physician / Surgeon	116	94	14	\$4,580,000
Orthopedics	60	74	13	\$3,984,000
Nurses (excluding anesthesiologist)	77	52	14	\$1,854,750
OB / GYN	20	40	7	\$4,025,000
Internal Medicine	37	39	8	\$4,976,268
Dentists	43	37	11	\$302,274
Emergency Medicine	31	36	11	\$4,373,750
Clinics - Outpatient - Surgery	21	36	16	\$4,533,500
Skilled Nursing Facilities	31	33	22	\$5,908,750
Cardiologists / Vascular Specialists	26	28	3	\$1,124,999
Clinics - Outpatient Only, No Surgery	24	26	11	\$1,458,250
Neurology	21	22	10	\$4,502,500
Radiology	27	20	1	\$350,000
Anesthesiology	27	18	4	\$9,500,000
Podiatrists	3	11	5	\$1,127,949
Pharmacists / Pharmacies	3	10	4	\$320,000
Cosmetic Surgery	9	10	3	\$575,000
Physical Medicine	3	10	1	\$50,000
Chiropractor	6	10	4	\$1,102,500
Pediatricians	11	9	5	\$2,987,500
Hospitalists	11	8	0	\$0
Ophthalmology	12	8	1	\$10,000
Physicians - Misc.	27	8	1	\$275,000
Nursing Homes	15	8	3	\$575,000
All other (excl. physicians and nurses)	8	8	3	\$170,000
Urologists	12	7	0	\$0
Gastroenterology	7	7	1	\$42,500
Nurse Anesthetists	11	7	2	\$1,225,000
Physicians / Surgeons Assistants	5	6	3	\$420,597
Otorhinolaryngology	5	5	3	\$810,171
Pathology	4	5	0	\$0
Alcohol / Drug Rehabilitation Centers	0	5	1	\$4,000
Infectious Disease	5	3	2	\$475,000
Psychiatry	5	3	0	\$0
Psychologists	0	3	0	\$0
Geriatrics	2	3	1	\$35,000
Oncology	2	3	2	\$2,700,000

Indemnity by Specialty / Entity Type, 2018 Sorted by Number of Closed Actions				
Specialty	Reported	Closed	Closed with Payment	Total Indemnity
Nephrology	1	2	0	\$0
EMT	2	2	1	\$87,500
Forensic / Legal Medicine	0	1	1	\$425,000
Hematology	0	1	1	\$75,000
Endocrinology	1	1	0	\$0
Dermatology	6	1	1	\$700,000
Rehabilitation Hospitals	0	1	0	\$0
Cardiac Centers	0	1	0	\$0
Radiologists - Non-Physicians (techs, etc)	3	1	0	\$0
Midwives	0	1	1	\$600,000
Pulmonologists	1	0	0	\$0
Hospices	1	0	0	\$0
Mental Institutions	1	0	0	\$0
Optometrists	1	0	0	\$0

Indemnity by Specialty / Entity Type, 2017 Sorted by Number of Closed Actions				
Specialty	Reported	Closed	Closed with Payment	Total Indemnity
Hospitals	295	321	235	\$65,628,647
Misc . Corporations / Partnership, etc	244	254	87	\$30,225,836
General Physician / Surgeon	96	119	31	\$8,751,081
Orthopedics	68	59	17	\$2,975,000
OB / GYN	34	58	14	\$4,747,500
Emergency Medicine	60	44	24	\$7,529,705
Dentists	59	44	14	\$572,794
Nurses (excluding anesthesiologist)	46	43	17	\$2,325,119
Skilled Nursing Facilities	35	34	37	\$8,346,250
Cardiologists / Vascular Specialists	33	31	4	\$4,417,500
Internal Medicine	39	31	9	\$1,044,564
Neurology	13	27	7	\$2,772,500
Radiology	31	26	7	\$2,532,500
Clinics - Outpatient - Surgery	25	23	11	\$7,330,334
Clinics - Outpatient Only, No Surgery	18	23	9	\$1,590,500
Anesthesiology	17	20	6	\$522,500
Pediatricians	12	17	8	\$10,909,044
Urologists	9	14	4	\$1,000,000
All other (excl. physicians and nurses)	14	14	5	\$380,000
Gastroenterology	9	13	1	\$200,000
Nursing Homes	7	12	5	\$548,001
Nurse Anesthetists	5	10	1	\$300,000
Physicians / Surgeons Assistants	11	9	3	\$860,597
Cosmetic Surgery	5	9	3	\$355,000
Hospitalists	14	9	3	\$762,000
Otorhinolaryngology	6	9	1	\$90,000
Chiropractor	11	8	6	\$1,234,500
Pharmacists / Pharmacies	9	7	8	\$335,500
Dermatology	3	6	1	\$500,000
Podiatrists	6	6	4	\$305,000
Psychiatry	12	4	2	\$240,000
Ophthalmology	7	4	0	\$0
Physicians - Misc.	11	4	1	\$15,000
Infectious Disease	6	3	0	\$0
Pathology	5	3	0	\$0
Psychologists	4	2	1	\$100,000
Allergy / Immunologists	0	2	1	\$75,000
Pulmonologists	1	2	0	\$0
Oncology	4	2	0	\$0
Radiologists - Non-Physicians (techs, etc)	4	2	1	\$300,000

Indemnity by Specialty / Entity Type, 2017 Sorted by Number of Closed Actions				
Specialty	Reported	Closed	Closed with Payment	Total Indemnity
Physical Medicine	10	1	0	\$0
Hematology	2	1	0	\$0
Nephrology	0	1	0	\$0
Geriatrics	4	1	2	\$100,000
Hospices	0	1	0	\$0
Alcohol / Drug Rehabilitation Centers	0	1	0	\$0
Cardiac Centers	1	1	0	\$0
Lab Techs - Non-Physicians	0	1	0	\$0
Mental Institutions	1	1	0	\$0
Occupational Medicine	1	0	0	\$0
Intensive Care Physicians	1	0	0	\$0
Rehabilitation Hospitals	3	0	0	\$0
Sanitarium - not hospital or mental health	1	0	0	\$0
Optometrists	1	0	0	\$0

Indemnity by Specialty of Individual / Entity Type, 2016 Sorted by Number of Closed Actions				
Specialty	Reported	Closed	Closed with Payment	Total Indemnity
Hospitals	342	370	249	\$72,505,801
Misc . Corporations / Partnership, etc	224	259	107	\$38,162,014
General Physician / Surgeon	101	126	43	\$25,122,000
Dentists	35	63	21	\$3,846,648
Orthopedics	77	62	21	\$6,170,600
Emergency Medicine	44	50	18	\$8,830,000
Radiology	23	49	16	\$8,214,500
OB / GYN	50	48	25	\$17,717,572
Nurses (excluding anesthesiologist)	35	43	26	\$8,153,542
Internal Medicine	44	42	11	\$9,750,000
Skilled Nursing Facilities	36	33	41	\$6,743,339
Neurology	33	25	11	\$5,409,475
Cardiologists / Vascular Specialists	27	24	4	\$1,562,499
Pharmacists / Pharmacies	15	21	20	\$361,712
Urologists	7	21	5	\$3,887,500
Anesthesiology	27	20	6	\$10,500,000
Clinics - Outpatient Only, No Surgery	19	20	14	\$3,831,373
Chiropractor	18	19	11	\$1,255,500
Clinics - Outpatient - Surgery	29	17	12	\$8,327,500
Nurse Anesthetists	8	17	6	\$1,470,000
Hospitalists	5	12	1	\$125,000
Nursing Homes	11	12	8	\$703,251
Gastroenterology	12	10	5	\$320,092
Physicians - Misc.	9	10	8	\$2,837,000
Cosmetic Surgery	8	9	0	\$0
Pediatricians	4	7	5	\$3,343,500
Pulmonologists	0	6	1	\$315,000
Psychiatry	5	5	0	\$0
Ophthalmology	5	5	2	\$1,010,000
Otorhinolaryngology	7	5	1	\$400,000
Physicians / Surgeons Assistants	11	4	1	\$175,000
Physical Medicine	3	4	1	\$155,000
Pathology	3	4	0	\$0
Podiatrists	6	4	3	\$425,000
All other (excl. physicians and nurses)	5	4	4	\$1,056,500
Radiologists - Non-Physicians (techs, etc)	2	3	2	\$225,000
Hematology	2	2	3	\$360,000
Psychologists	1	2	2	\$275,000
Intensive Care Physicians	0	2	2	\$525,000

Indemnity by Specialty of Individual / Entity Type, 2016 Sorted by Number of Closed Actions				
Specialty	Reported	Closed	Closed with Payment	Total Indemnity
Oncology	1	2	1	\$1,000,000
Hospices	1	2	1	\$59,999
Cardiac Centers	2	2	0	\$0
EMT	0	2	1	\$225,000
Pharmacologists	0	1	1	\$25,000
Nephrology	0	1	0	\$0
Endocrinology	1	1	0	\$0
Geriatrics	1	1	0	\$0
Dermatology	3	1	1	\$925,000
Mental Institutions	0	1	0	\$0
Optometrists	0	1	0	\$0
Forensic / Legal Medicine	1	0	1	\$425,000
Infectious Disease	1	0	0	\$0
Rehabilitation Hospitals	2	0	0	\$0
Alcohol / Drug Rehabilitation Centers	5	0	1	\$4,000
Midwives	1	0	1	\$600,000

Section VI

Claim Study by Means of Disposition

This sections presents claims data by means of disposition. Data are presented separately for cases involving hospitals, and physicians & surgeons. Each table displays:

- Number of closed cases
- Percentage of claims by means of disposition
- Average number of months from incident to report
- Average number of months from incident to disposition
- Average bodily injury severity
- Average economic damage amounts per case
- Average non-economic damage amounts per case
- Average total indemnity per case
- Average loss adjustment expense per case

Means of Disposition, All Cases, 2018									
Claim Reports			Average Months			Average Paid			
Disposition	Claims	Percent	Incident to Report	Incident to Disposition	Average Injury Severity	Economic Damages	Non-Economic Damages	Indemnity	Expense
Incidents Resulting in Payment									
Claims settled before litigation	78	23.5%	10	25	4.6	\$156,287	\$158,660	\$316,282	\$20,362
Settled before judgment	248	74.7%	18	52	5.9	\$255,642	\$263,391	\$540,957	\$109,917
Settled after verdict	2	0.6%	21	40	7.5	\$1,347,496	\$425,000	\$1,772,496	\$184,748
Total Settled	328	98.8%	16	45	5.6	\$238,672	\$239,471	\$495,038	\$89,076
Judgment for plaintiff	1	0.3%	47	84	9	.	\$5,000	\$5,000	\$175,224
Judgment for plaintiff after appeal	1	0.3%	19	44	9	\$30,000	\$30,000	\$60,000	\$524,425
Total Court Dispositions	2	0.6%	33	64	9	\$15,000	\$17,500	\$32,500	\$349,825
Total paid claim dispositions	332	1000%	17	46	5.6	\$237,204	\$240,979	\$494,874	\$92,390
Closed Without Payment									
Claims closed before litigation	88	24.5%	11	32	3.9	.	.	.	\$3,115
Lawsuit closed or abandoned before trial	251	69.9%	23	48	4.7	.	.	.	\$25,745
Total not disposed by court	339	94.4%	20	44	4.5	.	.	.	\$19,871
Direct verdict for defendant	6	1.7%	16	67	6	.	.	.	\$210,516
Judgment notwithstanding verdict for defendant	1	0.3%	6	53	5	.	.	.	\$112,308
Judgment for defendant	9	2.5%	23	58	4.3	.	.	.	\$1,134,615
Judgment for defendant after appeal	2	0.6%	42	87	9	.	.	.	\$60,438
Total Court Dispositions	18	5.0%	22	64	5.4	.	.	.	\$650,434
Total unpaid claim dispositions	359	100%	20	45	4.5	.	.	.	\$51,506

Means of Disposition, Cases Involving At Least One Physician or Surgeon, 2018									
	Cases Closed		Average Months			Average Paid			
Disposition	Claims	Percent	Incident to Report	Incident to Disposition	Average Injury Severity	Economic Damages	Non-Economic Damages	Indemnity	Expense
Incidents Closed With Payment									
Claims settled before litigation	7	5.10%	9	28	5.9	\$1,381,901	\$817,857	\$2,199,758	\$83,896
Settled before judgment	127	92.70%	21	58	6.1	\$269,663	\$324,141	\$636,585	\$150,785
Total Settled	134	97.80%	20	57	6.1	\$327,765	\$349,932	\$718,244	\$147,290
Judgment for plaintiff	1	0.70%	47	84	9	.	\$5,000	\$5,000	\$175,224
Judgment for plaintiff after appeal	1	0.70%	19	44	9	\$30,000	\$30,000	\$60,000	\$524,425
Total Court Dispositions	2	1.50%	33	64	9	\$15,000	\$17,500	\$32,500	\$349,825
Total paid claim dispositions	137	100%	20	57	6.2	\$323,757	\$348,150	\$711,567	\$152,601
Claims Closed Without Payment									
Claims closed before litigation	24	14.60%	12	28	3.5	.	.	.	\$4,940
Lawsuit closed or abandoned before	124	75.60%	26	48	4.9	.	.	.	\$26,767
Total not disposed by court	148	90.20%	24	45	4.7	.	.	.	\$23,227
Direct verdict for defendant	5	3.00%	17	68	5.4	.	.	.	\$252,619
Judgment notwithstanding verdict for	1	0.60%	6	53	5	.	.	.	\$112,308
Judgment for defendant	7	4.30%	27	66	4.9	.	.	.	\$1,450,976
Judgment for defendant after appeal	1	0.60%	43	114	9	.	.	.	\$108,321
Total Court Dispositions	14	8.50%	23	69	5.4	.	.	.	\$831,468
Total unpaid claim dispositions	164	100%	23	48	4.7	.	.	.	\$92,224

Means of Disposition, Cases Involving At Least One Hospital, 2018								
	Cases Closed		Average Months			Average Paid		
Disposition	Claims	Percent	Incident to Report	Incident to Disposition	Average Injury Severity	Economic Damages	Non-Economic Damages	Indemnity Expense
Incidents Closed With Payment								
Claims settled before litigation	51	25.4%	11	26	4.5	\$231,997	\$190,952	\$422,949 \$26,308
Settled before judgment	146	72.6%	17	52	6.1	\$278,290	\$265,655	\$578,192 \$131,669
Settled after verdict	2	1.0%	21	40	7.5	\$1,347,496	\$425,000	\$1,772,496 \$184,748
Total Settled	199	99.0%	16	45	5.7	\$277,172	\$248,112	\$550,409 \$105,201
Judgment for plaintiff	1	0.5%	47	84	9	.	\$5,000	\$5,000 \$175,224
Total Court Dispositions	1	0.5%	47	84	9	.	\$5,000	\$5,000 \$175,224
Total paid claim dispositions	201	100%	16	46	5.7	\$276,425	\$249,502	\$550,803 \$107,363
Incidents Closed Without Payment								
Claims closed before litigation	24	18.9%	10	46	4.7	.	.	\$5,862
Lawsuit closed or abandoned before	99	78.0%	23	55	4.9	.	.	\$23,714
Total not disposed by court	123	96.9%	20	53	4.9	.	.	\$20,231
Direct verdict for defendant	2	1.6%	7	59	7.5	.	.	\$275,734
Judgment for defendant	1	0.8%	17	66	7	.	.	\$9,226,507
Judgment for defendant after appeal	1	0.8%	43	114	9	.	.	\$108,321
Total Court Dispositions	4	3.1%	18	74	7.8	.	.	\$2,471,574
Total unpaid claim dispositions	127	100%	20	54	5	.	.	\$97,438

Means of Disposition, All Cases, 2017									
	Cases Closed		Average Months			Average Paid			
Disposition	Claims	Percent	Incident to Report	Incident to Disposition	Average Injury Severity	Economic Damages	Non-Economic Damages	Indemnity	Expense
Incidents Closed With Payment									
Claims settled before litigation	94	26.4%	10	25	4.4	\$34,161	\$78,166	\$117,674	\$12,949
Settled before judgment	259	72.8%	16	51	6.1	\$202,858	\$275,941	\$480,985	\$166,876
Settled after verdict	1	0.3%	8	158	1	\$250,000	\$250,000	\$500,000	.
Total Settled	354	99.4%	15	44	5.6	\$158,195	\$223,351	\$384,566	\$125,532
Judgment for plaintiff	1	0.3%	51	98	9	.	\$200,000	\$200,000	\$245,384
Total Court Dispositions	1	0.3%	51	98	9	.	\$200,000	\$200,000	\$245,384
Total paid claim dispositions	356	100%	15	44	5.7	\$157,307	\$223,642	\$383,951	\$125,906
Incidents Closed Without Payment									
Claims closed before litigation	129	31.7%	13	29	3.8	.	.	.	\$5,754
Lawsuit closed or abandoned before	250	61.4%	24	48	5	.	.	.	\$41,148
Settled after verdict	1	0.2%	14	86	4
Total not disposed by court	380	93.4%	21	42	4.6	.	.	.	\$29,024
Direct verdict for defendant	11	2.7%	19	66	5.8	.	.	.	\$116,632
Judgment for defendant	14	3.4%	20	62	6.5	.	.	.	\$156,144
Judgment for defendant after appeal	1	0.2%	24	95	8	.	.	.	\$990,405
Total Court Dispositions	26	6.4%	20	65	6.3	.	.	.	\$171,514
Total unpaid claim dispositions	407	100%	21	43	4.7	.	.	.	\$38,056

Means of Disposition, Cases Involving At Least One Physician or Surgeon, 2017									
	Cases Closed		Average Months			Average Paid			
Disposition	Claims	Percent	Incident to Report	Incident to Disposition	Average Injury Severity	Economic Damages	Non- Economic Damages	Indemnity	Expense
Incidents Closed With Payment									
Claims settled before litigation	16	10.0%	15	35	4.8	\$121,406	\$50,469	\$203,291	\$20,677
Settled before judgment	142	88.8%	20	57	6.4	\$240,306	\$347,339	\$589,061	\$248,597
Settled after verdict	1	0.6%	8	158	1	\$250,000	\$250,000	\$500,000	.
Total Settled	159	99.4%	19	55	6.2	\$228,402	\$316,853	\$549,681	\$224,099
Judgment for plaintiff	1	0.6%	51	98	9	.	\$200,000	\$200,000	\$245,384
Total Court Dispositions	1	0.6%	51	98	9	.	\$200,000	\$200,000	\$245,384
Total paid claim dispositions	160	100.0%	20	55	6.2	\$226,975	\$316,122	\$547,496	\$224,232
Incidents Closed Without Payment									
Claims closed before litigation	32	17.30%	14	37	4.2	.	.	.	\$3,157
Settled after verdict	1	0.50%	34	45	9	.	.	.	\$44,636
Total not disposed by court	177	95.70%	23	50	5.3	.	.	.	\$36,652
Direct verdict for defendant	8	3.9%	23	70	6.6	.	.	.	\$142,938
Judgment for defendant	11	5.3%	22	63	6.5	.	.	.	\$144,402
Judgment for defendant after appeal	1	0.5%	24	95	8	.	.	.	\$990,405
Total Court Dispositions	20	9.7%	23	67	6.6	.	.	.	\$186,117
Total unpaid claim dispositions	206	100.0%	25	50	5.2	.	.	.	\$60,099

Means of Disposition, Cases Involving At Least One Hospital, 2017									
	Cases Closed		Average Months			Average Paid			
Disposition	Claims	Percent	Incident to Report	Incident to Disposition	Average Injury Severity	Economic Damages	Non-Economic Damages	Indemnity	Expense
Incidents Closed With Payment									
Claims settled before litigation	45	24.2%	10	23	4.4	\$16,891	\$73,489	\$90,380	\$12,347
Settled before judgment	140	75.3%	15	51	6.1	\$229,462	\$369,692	\$599,154	\$240,743
Total Settled	185	100%	13	45	5.7	\$177,755	\$297,643	\$475,398	\$185,187
Total paid claim dispositions	185	100%	13	45	5.7	\$177,755	\$297,643	\$475,398	\$185,187
Incidents Closed Without Payment									
Claims closed before litigation	40	31.3%	9	31	4.1	.	.	.	\$13,913
Lawsuit closed or abandoned before	80	62.5%	24	54	5.3	.	.	.	\$71,346
Settled after verdict	1	0.8%	14	86	4
Total not disposed by court	121	94.5%	19	46	4.9	.	.	.	\$51,770
Direct verdict for defendant	2	1.6%	8	55	5.5	.	.	.	\$75,621
Judgment for defendant	3	2.3%	10	71	8	.	.	.	\$264,331
Judgment for defendant after appeal	1	0.8%	24	95	8	.	.	.	\$990,405
Total Court Dispositions	6	4.7%	12	70	7.2	.	.	.	\$322,440
Total unpaid claim dispositions	127	100%	19	47	4.9	.	.	.	\$64,053

Means of Disposition, All Cases, 2016									
	Cases Closed		Average Months			Average Paid			
Disposition	Claims	Percent	Incident to Report	Incident to Disposition	Average Injury Severity	Economic Damages	Non-Economic Damages	Indemnity	Expense
Incidents Closed With Payment									
Claims settled before litigation	105	26.40%	7	26	3.8	\$73,763	\$115,561	\$189,782	\$11,057
Settled before judgment	287	72.30%	18	51	6.3	\$306,990	\$246,747	\$569,194	\$156,080
Total Settled	392	98.70%	15	44	5.6	\$244,519	\$211,608	\$467,566	\$117,235
Direct verdict for plaintiff	1	0.30%	15	116	9	\$206,000	.	\$206,000	\$243,171
Judgment for plaintiff	4	1.00%	32	74	6	\$780,248	\$675,000	\$1,455,248	\$250,373
Total Court Dispositions	5	1.30%	28	82	6.6	\$665,398	\$540,000	\$1,205,398	\$248,932
Total paid claim dispositions	397	100%	15	44	5.7	\$249,819	\$215,744	\$476,858	\$118,893
Incidents Closed Without Payment									
Claims closed before litigation	139	34.00%	10	29	3.6	.	.	.	\$2,007
Lawsuit closed or abandoned before	251	61.40%	22	48	5.1	.	.	.	\$35,500
Settled after verdict	1	0.20%	34	45	9	.	.	.	\$44,636
Total not disposed by court	391	95.60%	18	41	4.6	.	.	.	\$23,617
Direct verdict for defendant	4	1.00%	17	56	4.8	.	.	.	\$65,866
Judgment for defendant	12	2.90%	20	49	5.2	.	.	.	\$118,395
Judgment for defendant after appeal	2	0.50%	10	74	6	.	.	.	\$48,106
Total Court Dispositions	18	4.40%	18	53	5.2	.	.	.	\$98,912
Total unpaid claim dispositions	409	100%	18	42	4.6	.	.	.	\$26,930

Means of Disposition, Cases Involving At Least One Physician, 2016									
	Cases Closed		Average Months			Average Paid			
Disposition	Claims	Percent	Incident to Report	Incident to Disposition	Average Injury Severity	Economic Damages	Non-Economic Damages	Indemnity	Expense
Incidents Closed With Payment									
Claims settled before litigation	17	8.90%	11	34	4	\$71,555	\$238,671	\$310,226	\$22,122
Settled before judgment	171	89.50%	20	54	6.5	\$432,915	\$331,862	\$789,377	\$205,794
Total Settled	188	98.40%	19	52	6.3	\$400,239	\$323,435	\$746,050	\$189,185
Direct verdict for plaintiff	1	0.50%	15	116	9	\$206,000	.	\$206,000	\$243,171
Judgment for plaintiff	2	1.00%	39	96	6	\$1,523,954	\$1,350,000	\$2,873,954	\$369,118
Total Court Dispositions	3	1.60%	31	103	7	\$1,084,636	\$900,000	\$1,984,636	\$327,136
Total paid claim dispositions	191	100%	19	53	6.3	\$410,989	\$332,491	\$765,504	\$191,352
Incidents Closed Without Payment									
Claims closed before litigation	32	17.30%	14	37	4.2	.	.	.	\$3,157
Lawsuit closed or abandoned before	144	77.80%	24	52	5.5	.	.	.	\$44,040
Settled after verdict	1	0.50%	34	45	9	.	.	.	\$44,636
Total not disposed by court	177	95.70%	23	50	5.3	.	.	.	\$36,652
Direct verdict for defendant	1	0.50%	25	50	9	.	.	.	\$164,530
Judgment for defendant	6	3.20%	28	66	6.3	.	.	.	\$224,346
Judgment for defendant after appeal	1	0.50%	18	70	3	.	.	.	\$76,548
Total Court Dispositions	8	4.30%	26	65	6.3	.	.	.	\$198,394
Total unpaid claim dispositions	185	100%	23	50	5.3	.	.	.	\$43,647

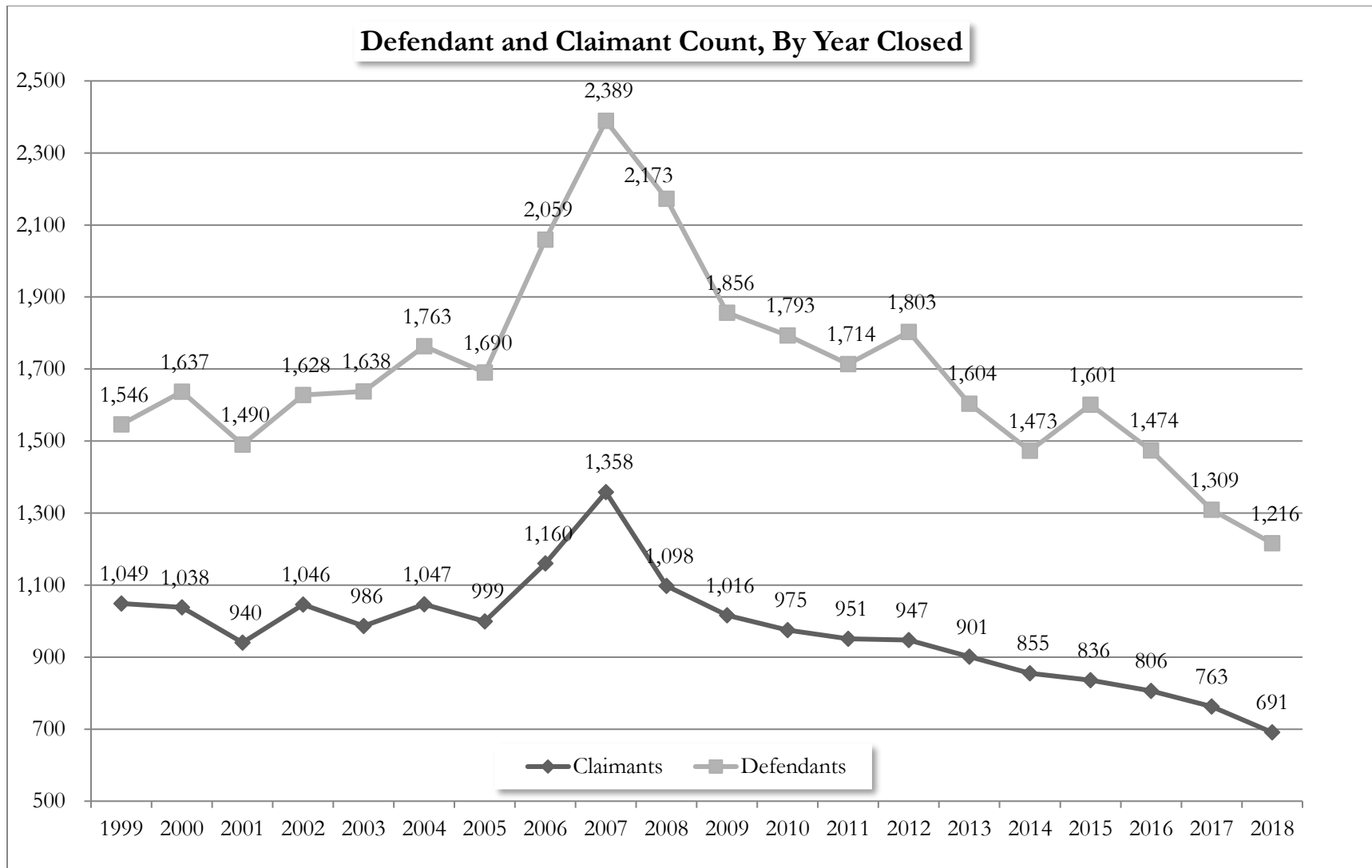
Means of Disposition, Cases Involving At Least One Hospital, 2016									
	Cases Closed		Average Months			Average Paid			
Disposition	Claims	Percent	Incident to Report	Incident to Disposition	Average Injury Severity	Economic Damages	Non-Economic Damages	Indemnity	Expense
Incidents Closed With Payment									
Claims settled before litigation	59	28.4%	7	24	4.2	\$95,549	\$161,987	\$257,536	\$12,432
Settled before judgment	146	70.2%	19	54	6.4	\$293,757	\$254,737	\$576,576	\$179,288
Total Settled	205	98.6%	16	46	5.8	\$236,712	\$228,043	\$484,755	\$131,266
Judgment for plaintiff	3	1.4%	23	50	5.7	\$40,330	.	\$40,330	\$152,135
Total Court Dispositions	3	1.4%	23	50	5.7	\$40,330	.	\$40,330	\$152,135
Total paid claim dispositions	208	100%	16	46	5.8	\$233,880	\$224,754	\$478,345	\$131,567
Incidents Closed Without Payment									
Claims closed before litigation	68	45.0%	8	29	3.7	.	.	.	\$2,497
Lawsuit closed or abandoned before	76	50.3%	23	53	5.6	.	.	.	\$58,354
Total not disposed by court	144	95.4%	16	42	4.7	.	.	.	\$31,977
Direct verdict for defendant	2	1.3%	21	86	3.5	.	.	.	\$47,218
Judgment for defendant	3	2.0%	13	40	7	.	.	.	\$140,061
Judgment for defendant after appeal	2	1.3%	10	74	6	.	.	.	\$48,106
Total Court Dispositions	7	4.6%	14	63	5.7	.	.	.	\$87,262
Total unpaid claim dispositions	151	100.0%	16	43	4.8	.	.	.	\$34,540

Section VII

Analysis by Occurrence and Defendant

An occurrence represents an event or series of events that are alleged to have produced harm to a claimant. Previous reports presented data on the number of claims. A claim corresponds to a single policy against which a demand for damages has been made, or may otherwise be liable for payout. In fact, multiple claims may be associated with the same practitioner for the same incident. For example, a primary insurer may report a claim for a given insured. That same insured's excess carrier may report an additional claim if it also makes a payment over and above the liability assumed by the primary carrier. In addition, if an insurer closes and subsequently reopens a claim, two claims are counted in the DIFP database.

This report presents two alternative methods of aggregating the data, only recently available to DIFP's efforts to more effectively code the data. First, data are presented on a *per defendant* basis, such that a single practitioner is not counted more than once, regardless of the number of claims against that practitioner. Secondly, data are presented on a *per occurrence* basis, where an occurrence corresponds to a single injured party (or in rare cases, more than one injured party as in the case of a mother and child both injured during childbirth). A single occurrence may include multiple claims as well as multiple defendants. The table below illustrates the different methods of aggregating the DIFP claims data. See the executive summary for further discussion.



Closed Malpractice Actions by Type of Defendants 1996-2018										
	Claimants*				Defendants			Defendants With Payment Made on Their Behalf		
Year Case Was Closed	Total	Paid	Total Indemnity	Average Recovery Per Claimant	Physicians	Institutions & Corps.	All Other	Physicians	Institutions & Corps.	All Other
1996	1,187	522	\$100,180,085	\$191,916	971	726	200	268	273	73
1997	1,006	437	\$89,262,936	\$204,263	769	677	163	201	260	72
1998	1,013	420	\$73,473,271	\$174,936	747	645	182	136	255	83
1999	1,049	484	\$77,005,522	\$159,102	708	683	155	210	289	63
2000	1,038	393	\$103,221,836	\$262,651	797	681	159	204	228	45
2001	940	395	\$86,460,489	\$218,887	685	665	140	199	248	53
2002	1,046	446	\$110,002,907	\$246,643	791	705	132	201	280	44
2003	986	446	\$118,549,306	\$265,806	732	758	148	208	301	42
2004	1,047	427	\$128,704,434	\$301,416	828	759	176	223	255	56
2005	999	401	\$136,180,518	\$339,602	813	695	182	195	248	60
2006	1,160	437	\$121,150,893	\$277,233	952	878	229	171	289	64
2007	1,358	630	\$146,117,552	\$231,933	989	1,209	191	221	473	74
2008	1,098	484	\$131,808,834	\$272,332	914	1,071	188	158	441	41
2009	1,016	445	\$137,047,345	\$307,972	750	925	181	153	342	54
2010	975	462	\$110,652,736	\$239,508	756	882	155	141	375	45
2011	951	457	\$135,429,805	\$296,345	634	893	187	129	389	46
2012	947	460	\$136,354,747	\$296,423	711	924	168	143	388	48
2013	901	401	\$119,211,016	\$297,284	616	799	189	123	292	56
2014	855	394	\$143,197,594	\$363,446	527	785	161	118	313	48
2015	836	398	\$133,217,679	\$334,718	589	816	196	122	312	69
2016	806	397	\$189,312,818	\$476,858	564	726	184	139	303	63
2017	763	356	\$136,686,399.00	\$383,951	503	689	117	114	289	36
2018	691	332	\$164,298,256.00	\$494,874	425	673	118	90	284	33

*A case is considered closed only when the last claim against the last defendant is closed.

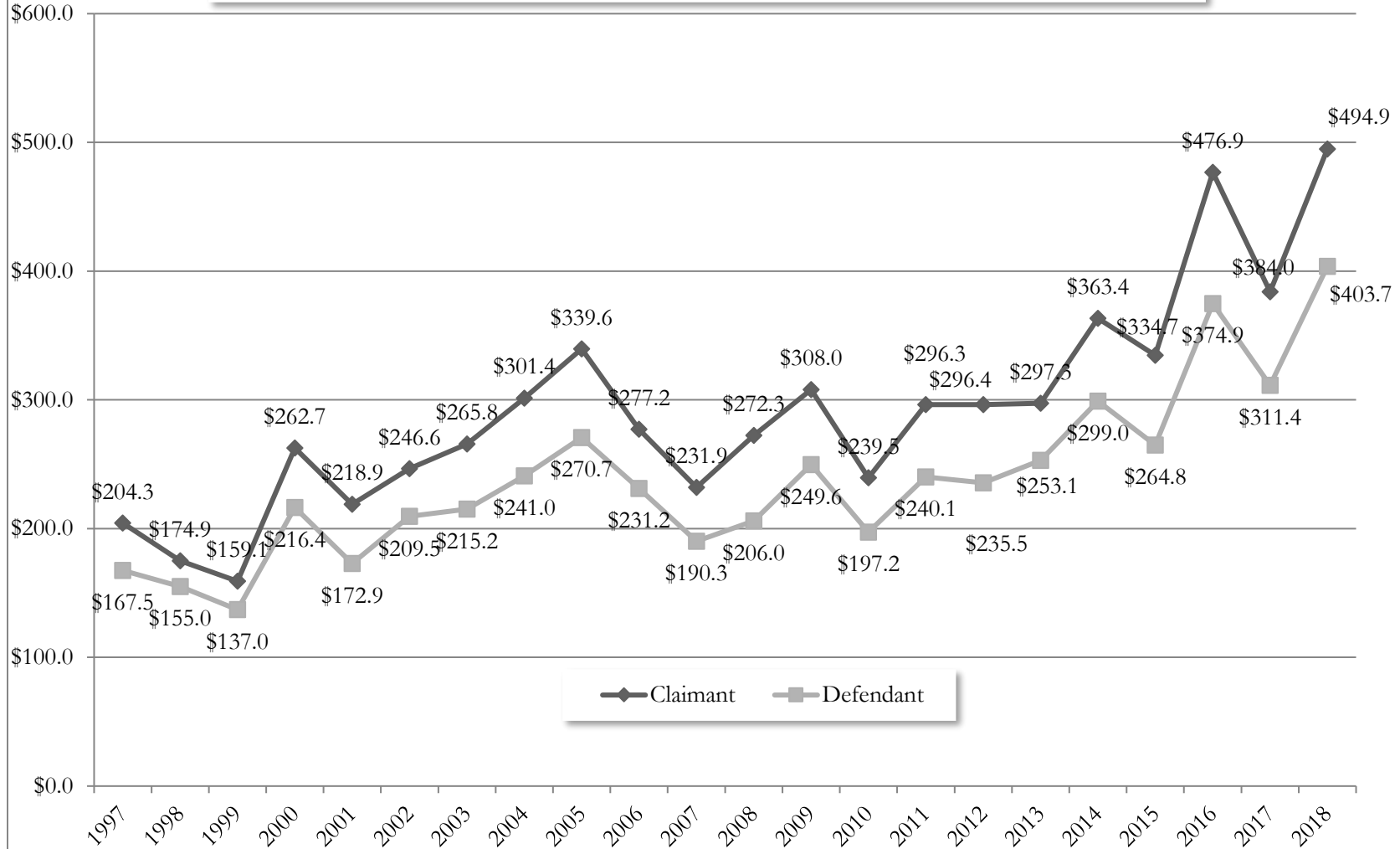
Cases Involving At Least One Physician Defendant, Closed 1996-2018										
	Claimants*				Defendants			Defendants With Payment Made on Their Behalf		
Year Closed	Total	Paid	Total Indemnity	Average Payment	Physicians	Institutions & Corps.	All Other	Physicians	Institutions & Corps.	All Other
1996	696	295	\$68,946,794	\$233,718	971	343	41	268	92	16
1997	556	228	\$70,821,499	\$310,621	769	320	21	201	106	8
1998	530	183	\$50,669,231	\$276,881	747	284	15	136	89	3
1999	542	240	\$54,021,376	\$225,089	708	267	16	210	89	3
2000	579	223	\$69,813,034	\$313,063	797	317	21	204	94	2
2001	505	199	\$64,014,819	\$321,683	685	285	28	199	83	11
2002	583	217	\$60,898,939	\$280,640	791	301	24	201	81	6
2003	521	236	\$76,069,069	\$322,327	732	363	23	208	118	6
2004	582	233	\$94,393,306	\$405,121	828	372	30	223	93	11
2005	569	226	\$100,559,047	\$444,952	813	354	46	195	111	13
2006	660	219	\$87,767,272	\$400,764	952	481	64	171	122	8
2007	700	301	\$98,118,404	\$325,975	989	613	48	221	182	16
2008	565	249	\$92,372,370	\$370,973	914	569	63	158	213	5
2009	504	237	\$100,140,247	\$422,533	750	477	54	153	174	6
2010	513	212	\$71,038,316	\$335,086	756	465	40	141	158	3
2011	429	193	\$85,717,945	\$444,134	634	417	76	129	147	11
2012	456	209	\$94,160,400	\$450,528	711	481	51	143	165	5
2013	434	186	\$81,302,740	\$437,112	616	397	62	123	108	12
2014	399	171	\$86,458,143	\$505,603	527	362	52	118	111	10
2015	397	162	\$82,504,850	\$509,289	589	390	56	122	101	16
2016	376	191	\$146,211,257	\$765,504	564	364	57	139	132	14
2017	366	160	\$87,599,353	\$547,496	503	315	35	114	107	9
2018	301	137	\$97,484,642.00	\$711,567	425	291	39	90	102	8

Cases Involving At Least One Payment Made on Behalf of a Physician Defendant, Closed 1996-2018										
	Claimants*				Defendants			Defendants With Payment Made on Their Behalf		
Year Closed	Total	Paid	Total Indemnity	Average Payment	Physicians	Institutions & Corps.	All Other	Physicians	Institutions & Corps.	All Other
1996	244	244	\$61,066,911	\$250,274	350	119	24	268	40	14
1997	179	179	\$57,760,631	\$322,685	248	102	5	201	40	2
1998	126	126	\$33,509,245	\$265,946	175	77	2	136	28	
1999	192	192	\$44,453,963	\$231,531	253	89	7	210	35	3
2000	181	181	\$58,661,903	\$324,099	251	104	13	204	44	2
2001	169	169	\$54,398,300	\$321,883	244	118	9	199	55	7
2002	177	177	\$52,936,844	\$299,078	252	106	7	201	39	5
2003	189	189	\$66,283,798	\$350,708	284	148	10	208	61	3
2004	192	192	\$87,623,411	\$456,372	302	139	8	223	51	5
2005	174	174	\$87,657,017	\$503,776	269	140	15	195	59	8
2006	150	150	\$64,123,400	\$427,489	246	139	5	171	49	3
2007	198	198	\$69,625,408	\$351,643	307	167	21	221	63	13
2008	142	142	\$67,051,477	\$472,194	244	130	13	158	60	3
2009	144	144	\$64,461,135	\$447,647	211	139	8	153	69	3
2010	129	129	\$50,190,262	\$389,072	211	129	8	141	58	1
2011	110	110	\$59,668,978	\$542,445	200	106	19	129	49	6
2012	129	129	\$69,222,975	\$536,612	205	138	11	143	75	3
2013	113	113	\$46,724,299	\$413,489	160	84	8	123	26	5
2014	111	111	\$60,237,853	\$542,683	147	109	14	118	47	7
2015	110	110	\$63,832,275	\$580,293	163	121	13	122	45	11
2016	118	118	\$102,886,787	\$871,922	184	111	22	139	50	7
2017	101	101	\$64,815,181	\$641,734	145	91	13	114	43	5
2018	81	81	\$79,845,892	\$985,752	128	89	7	90	44	2

Cases Involving At Least One Institutional Defendant (Including Nursing Homes, Hospitals, Clinics & Group Practices) Closed 1996-2018										
	Claimants				Defendants			Defendants With Payment Made on Their Behalf		
Year Closed	Total	Paid	Total Indemnity	Average Payment	Physicians	Institutions & Corps.	All Other	Physicians	Institutions & Corps.	All Other
1996	644	326	\$69,970,388	\$214,633	455	726	36	109	273	14
1997	571	274	\$68,932,758	\$251,579	393	677	26	94	260	8
1998	563	275	\$60,326,106	\$219,368	364	645	27	68	255	4
1999	606	310	\$52,450,674	\$169,196	336	683	19	84	289	4
2000	580	248	\$80,960,099	\$326,452	395	681	22	91	228	2
2001	551	271	\$66,376,752	\$244,933	326	665	29	105	248	12
2002	602	313	\$86,248,579	\$275,555	374	705	17	92	280	6
2003	623	326	\$92,831,105	\$284,758	383	758	26	113	301	9
2004	622	302	\$104,195,247	\$345,017	439	759	33	125	255	14
2005	593	278	\$109,197,786	\$392,798	445	695	37	114	248	11
2006	720	328	\$101,575,111	\$309,680	569	878	59	104	289	13
2007	964	493	\$120,641,810	\$244,710	658	1209	48	131	473	15
2008	786	391	\$115,302,963	\$294,892	632	1071	51	92	441	6
2009	729	349	\$117,928,738	\$337,905	534	925	45	101	342	7
2010	701	377	\$97,104,591	\$257,572	526	882	46	90	375	6
2011	719	389	\$125,589,788	\$322,853	438	893	82	91	389	13
2012	727	387	\$119,048,134	\$307,618	517	924	44	103	388	7
2013	653	309	\$105,303,598	\$340,788	435	799	64	66	292	11
2014	639	322	\$132,494,423	\$411,473	378	785	62	79	313	11
2015	633	333	\$119,009,721	\$357,387	423	816	74	88	312	23
2016	591	314	\$149,798,516	\$477,065	395	726	55	93	303	13
2017	561	290	\$116,288,994	\$400,997	317	689	34	70	289	7
2018	541	290	\$146,407,311	\$504,853	313	673	52	69	284	12

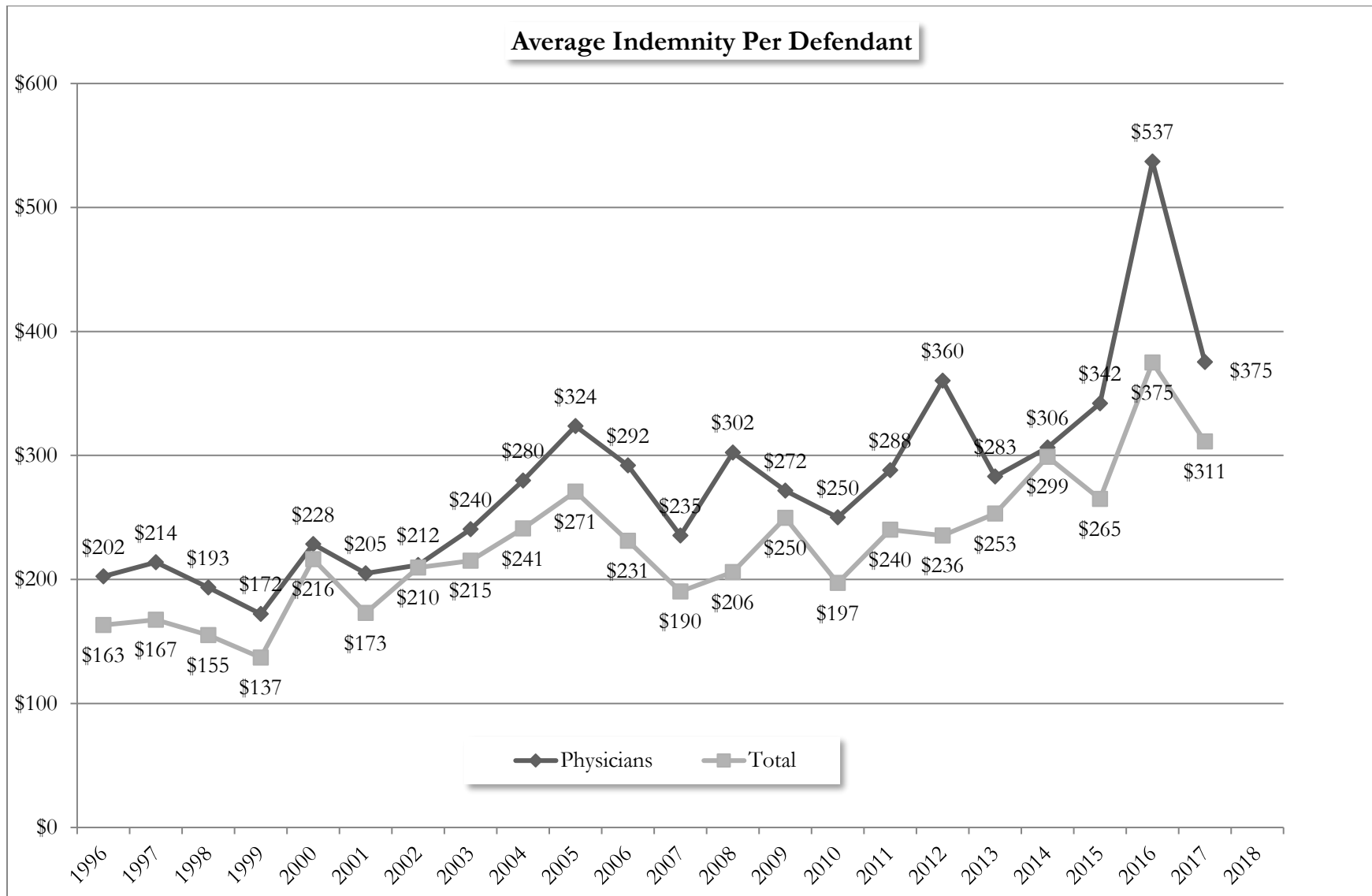
Cases Involving At Least One Payment Made on Behalf of an Institutional Defendant (Including Nursing Homes, Hospitals, Clinics & Group Practices) Closed 1996-2018										
	Claimants				Defendants			Defendants With Payment Made on Their Behalf		
Year Closed	Total	Paid	Total Indemnity	Average Payment	Physicians	Institutions & Corps.	All Other	Physicians	Institutions & Corps.	All Other
1996	262	262	\$54,794,029	\$209,138	166	302	15	45	273	8
1997	229	229	\$55,223,758	\$241,152	144	293	8	44	260	4
1998	236	236	\$52,754,871	\$223,538	122	275	11	27	255	2
1999	267	267	\$46,329,612	\$173,519	116	319	10	35	289	2
2000	207	207	\$70,078,156	\$338,542	135	263	11	46	228	1
2001	232	232	\$56,314,110	\$242,733	112	295	14	65	248	9
2002	263	263	\$73,040,216	\$277,719	124	311	7	38	280	2
2003	273	273	\$80,035,669	\$293,171	162	352	8	56	301	6
2004	238	238	\$82,691,043	\$347,441	138	306	8	58	255	6
2005	229	229	\$89,427,773	\$390,514	164	290	15	57	248	5
2006	274	274	\$85,029,472	\$310,327	198	363	38	49	289	8
2007	428	428	\$107,210,371	\$250,492	242	555	18	63	473	8
2008	358	358	\$102,771,123	\$287,070	282	534	21	56	441	2
2009	308	308	\$108,005,147	\$350,666	245	422	25	61	342	3
2010	343	343	\$84,648,036	\$246,787	225	440	21	53	375	5
2011	356	356	\$116,173,088	\$326,329	197	459	40	55	389	10
2012	349	349	\$102,996,277	\$295,118	233	458	17	64	388	1
2013	272	272	\$92,569,624	\$340,330	154	337	37	28	292	6
2014	282	282	\$118,589,711	\$420,531	150	364	22	36	313	9
2015	279	279	\$102,671,495	\$367,998	140	386	30	38	312	12
2016	272	272	\$126,859,416	\$466,395	166	350	29	48	303	10
2017	264	264	\$102,651,994	\$388,833	129	335	13	47	289	3
2018	257	257	\$136,479,812	\$531,050	130	331	16	43	284	2

**Average Payment Received by Claimant, and Paid on Behalf of Defendant
in \$000s**



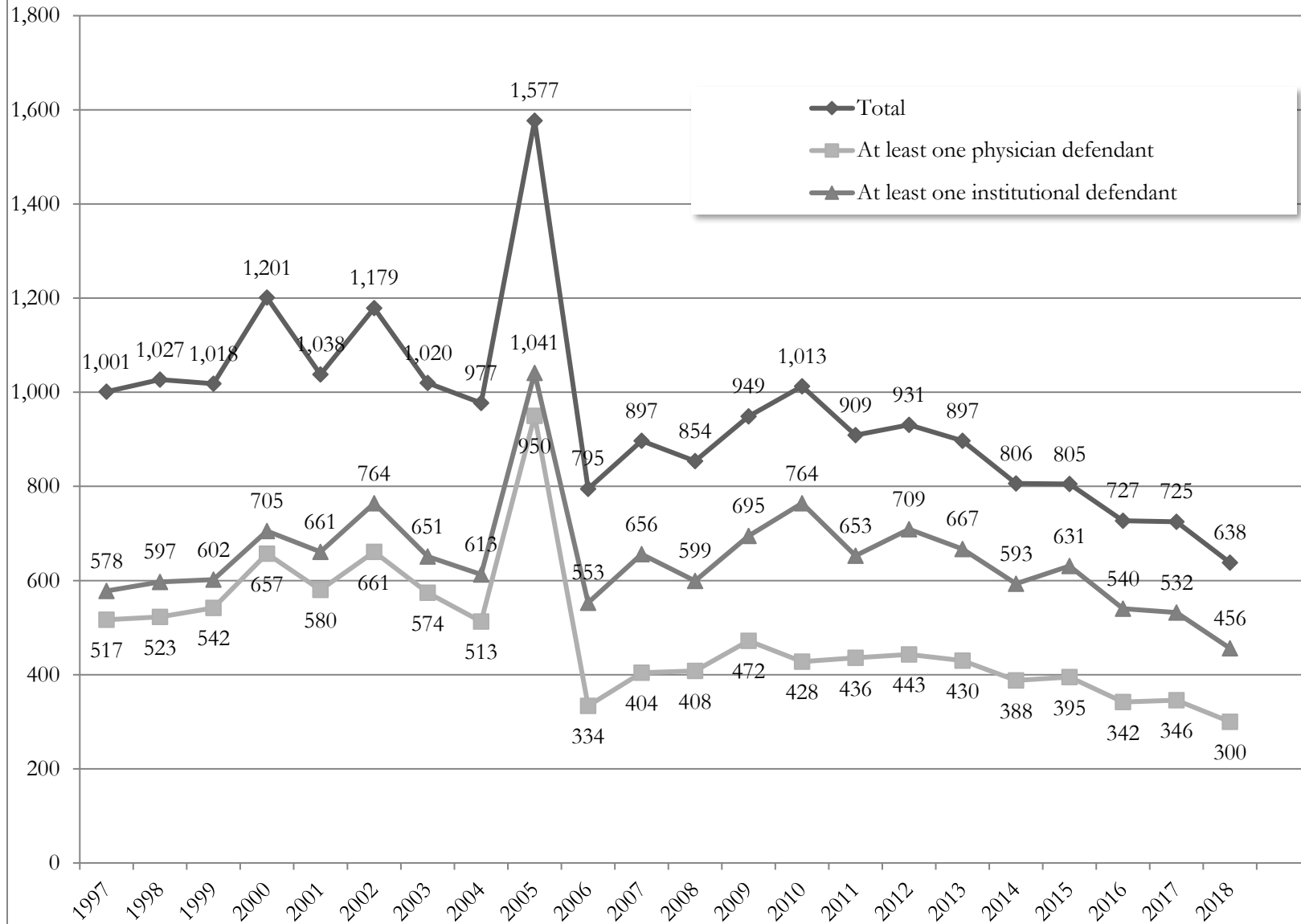
Number of Defendants, 1996 – 2018*												
	Physicians			Institutions (Including Nursing Homes, Hospitals, Clinics, & Group Practices)			All Other (Nurses, Pharmacists, etc.)			Total		
Year	Defs.	With Payment	Average Indemnity	Defs.	With Payment	Average Indemnity	Defs.	With Payment	Average Indemnity	Defs.	With Payment	Average Indemnity
1996	971	268	\$202,485	726	273	\$157,299	200	73	\$40,705	1,897	614	\$163,160
1997	769	201	\$213,930	677	260	\$170,440	163	72	\$27,063	1,609	533	\$167,473
1998	747	136	\$193,433	645	255	\$174,531	182	83	\$32,059	1,574	474	\$155,007
1999	708	210	\$172,152	683	289	\$132,716	155	63	\$39,663	1,546	562	\$137,021
2000	797	204	\$228,460	681	228	\$241,281	159	45	\$35,639	1,637	477	\$216,398
2001	685	199	\$205,014	665	248	\$170,477	140	53	\$63,858	1,490	500	\$172,921
2002	791	201	\$211,716	705	280	\$228,640	132	44	\$77,931	1,628	525	\$209,529
2003	732	208	\$240,411	758	301	\$210,514	148	42	\$123,313	1,638	551	\$215,153
2004	828	223	\$279,692	759	255	\$246,580	176	56	\$61,698	1,763	534	\$241,020
2005	813	195	\$323,656	695	248	\$266,143	182	60	\$117,736	1,690	503	\$270,737
2006	952	171	\$291,873	878	289	\$221,439	229	64	\$113,196	2,059	524	\$231,204
2007	989	221	\$235,497	1209	473	\$184,329	191	74	\$93,040	2,389	768	\$190,257
2008	914	158	\$302,407	1071	441	\$181,574	188	41	\$96,446	2,173	640	\$205,951
2009	750	153	\$271,667	925	342	\$266,414	181	54	\$80,904	1,856	549	\$249,631
2010	756	141	\$250,029	882	375	\$194,547	155	45	\$54,301	1,793	561	\$197,242
2011	634	129	\$288,000	893	389	\$242,772	187	46	\$83,463	1,714	564	\$240,124
2012	711	143	\$360,290	924	388	\$209,955	168	48	\$70,226	1,803	579	\$235,500
2013	616	123	\$283,043	799	292	\$255,542	189	56	\$174,618	1,604	471	\$253,102
2014	527	118	\$306,351	785	313	\$329,576	161	48	\$81,061	1,473	479	\$298,951
2015	589	122	\$341,974	816	312	\$255,200	196	69	\$172,092	1,601	503	\$264,846
2016	564	139	\$537,045	726	303	\$333,280	184	63	\$217,138	1,474	505	\$374,877
2017	503	114	\$375,264	689	289	\$308,134	117	36	\$134,875	1,309	439	\$311,359
2018	425	90	\$509,791	673	284	\$399,930	118	33	\$146,575	1,216	407	\$403,681.219

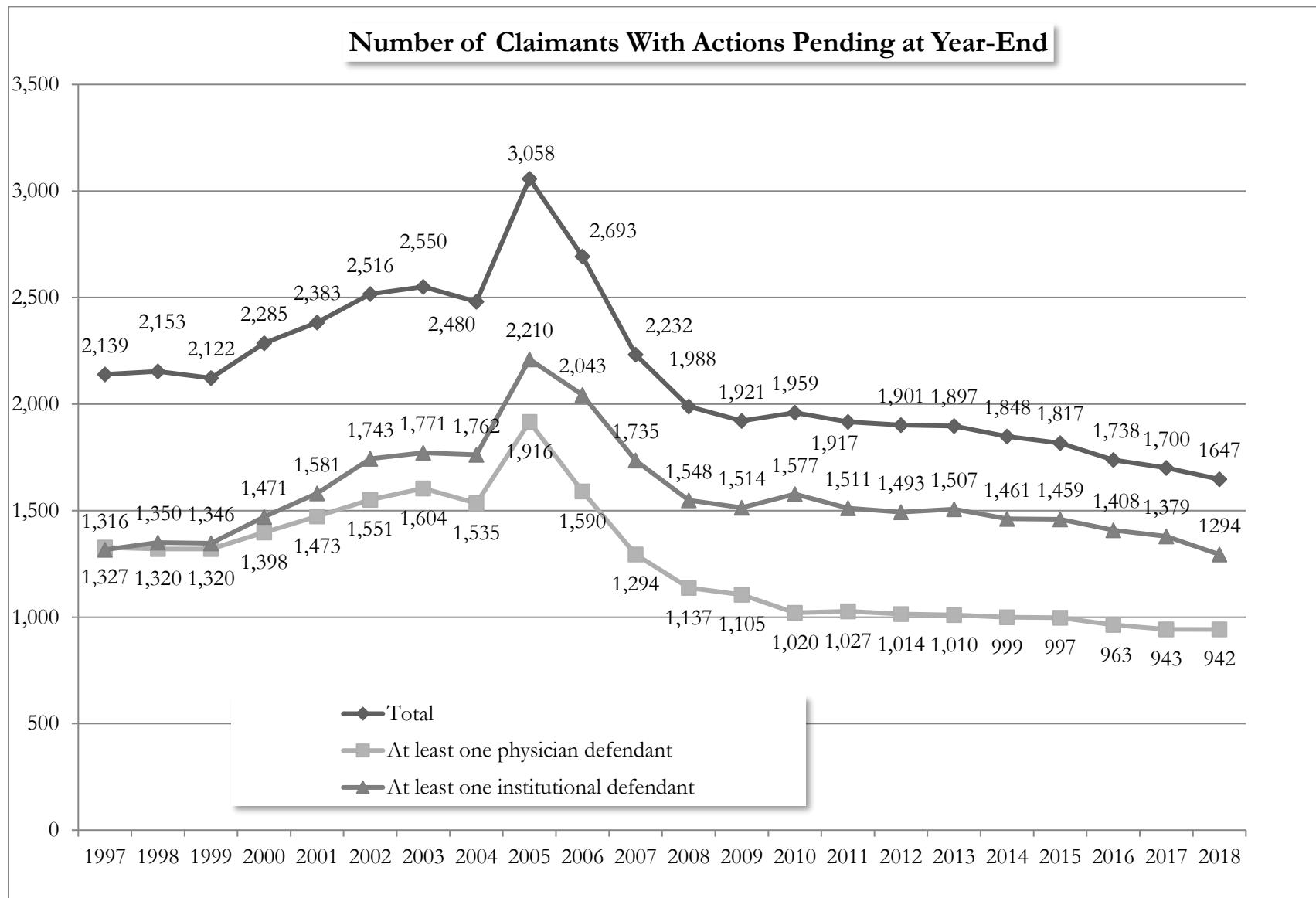
*Each defendant is counted in the year the occurrence was closed, regardless of whether the claim against the individual practitioner was closed in an earlier year.

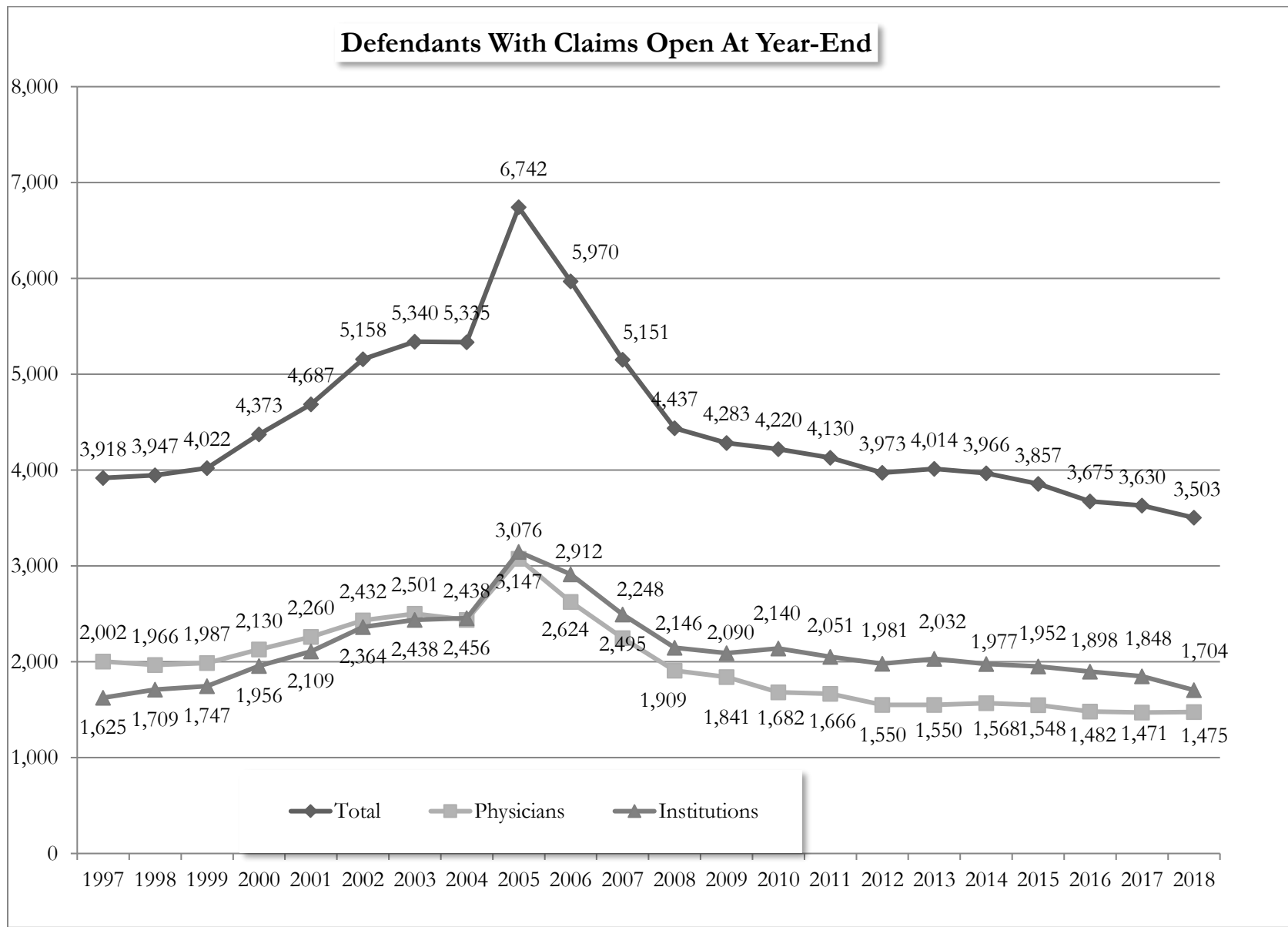


Claimants and Associated Number of Defendants By Report Year					
		Defendants			
Year Reported	Claimants	Physicians	Institutions	All Other	Total
1990	1,098	802	587	243	1,632
1991	1,135	910	661	192	1,763
1992	1,192	902	693	198	1,793
1993	1,148	933	692	185	1,810
1994	1,097	896	643	163	1,702
1995	1,163	934	708	186	1,828
1996	1,040	782	710	139	1,631
1997	1,001	708	663	163	1,534
1998	1,027	711	729	163	1,603
1999	1,018	729	721	171	1,621
2000	1,201	940	890	158	1,988
2001	1,038	815	818	171	1,804
2002	1,179	963	960	176	2,099
2003	1,020	801	832	187	1,820
2004	977	765	777	216	1,758
2005	1,577	1451	1386	260	3,097
2006	795	500	643	144	1,287
2007	897	613	792	165	1,570
2008	854	575	722	162	1,459
2009	949	682	869	151	1,702
2010	1,013	597	932	201	1,730
2011	909	618	804	202	1,624
2012	931	595	854	197	1,646
2013	897	616	850	179	1,645
2014	806	545	730	150	1,425
2015	805	569	791	132	1,492
2016	727	498	672	122	1,292
2017	725	492	639	133	1,264
2018	638	429	529	131	1,089

Number of New Claimants, by Report Year







Section VIII

Nature and Substance of Allegations and Outcomes

Recently, the DIFP added a new data field derived from the “allegation codes” used by the National Practitioner Databank (NPDB). The allegation code is a rudimentary typology that captures information about the nature and substance of the alleged medical error or omission. However, this field has proven quite limited. In many instances, it captures information at such a high level of generality as to be nearly tautological. For example, a high percentage of claims were coded as *improper performance*, a description that conveys no additional information beyond the knowledge obtained from the mere fact that a claim has been filed.

As part of data enhancements, additional typologies were developed to capture more meaningful details about the nature of allegations of malpractice. To date, over 13,000 records have been manually reviewed and allegation and outcome codes were derived from the written narratives that accompany each claim that is filed with the DIFP. In addition, new classifications were developed to capture greater information about the nature and severity of injuries than was captured by the traditional 9-point injury severity scale. Basic tables derived from the recoded data are presented in this report.

Readers are cautioned that the figures presented in the following tables are not intended to be an absolute accounting of all types of errors. The number of occurrences will not reconcile with those presented in other sections of the report. This is because the data were produced prior to the due date for the filing on which the remainder of the report is based. In addition, some records had to be discarded due to missing or incomplete narratives. However, the numbers should provide readers with a good sense of typical allegations, as well as their relative (if not absolute) frequencies. The figures should be interpreted as an *undercount* of the true and (currently) unknown frequencies of various allegations.

Adverse Outcomes by Medical Category Closed Occurrences, 2005-2018			
Category	Claimants	Claimants With Payment	Average Indemnity Per Paid Claimant
Surgery	4,550	2,023	\$325,615
Treatment	2,610	1,244	\$249,475
Diagnosis	2,581	1,230	\$452,723
Other / miscellaneous	2,216	1,043	\$137,345
Medication	1,267	579	\$203,866
Pregnancy & childbirth	877	446	\$847,780
Anesthesia	276	110	\$356,771
IV & Blood Products	229	126	\$170,683
Total	14,606	6,801	\$327,315

Adverse Outcomes by Medical Category Closed Occurrences, 2004-2018 Percent			
Category	Claimants	Claimants With Payment	Total Indemnity
Surgery	31.2%	29.7%	29.6%
Treatment	17.9%	18.3%	13.9%
Diagnosis	17.7%	18.1%	25.0%
Patient Safety / Ethics /	15.2%	15.3%	6.4%
Medication	8.7%	8.5%	5.3%
Pregnancy & childbirth	6.0%	6.6%	17.0%
Anesthesia	1.9%	1.6%	1.8%
IV & Blood Products	1.6%	1.9%	1.0%
Total	100%	100%	100%

Allegations, 2005-2018				
Allegation	Claimants	Claimants Receiving Pmt	Avg Payment	Avg. Injury Severity (1-9)
Alleged Diagnostic Failures				
Diagnostics Allegations - Infectious Conditions				
Respiratory infections	50	23	\$281,674	6.8
Other or unknown infection	48	23	\$411,470	6.0
Meningitis, encephalitis, other central nervous system infection	46	31	\$1,031,868	7.7
Digestive disorders	29	11	\$57,727	4.8
Spine / spinal cord disorder	18	6	\$928,056	6.3
Musculoskeletal disorder order- excluding spine	16	11	\$769,091	5.5
Development of septic condition during care	16	12	\$664,125	7.5
Heart Condition	13	6	\$472,500	8.3
Integumentary system - skin, hair, nails etc	12	3	\$436,667	4.5
Diseases of the genitourinary system	9	4	\$86,950	6.3
Diseases of the reproductive system	6	4	\$179,737	6.5
Auditory condition	4	1	\$65,000	5.8
Blood and immune disorders	3	3	\$833,333	8.3
Visual condition	2	1	\$3,000	5.0
Other respiratory conditions	1	1	\$235,000	9.0
Other respiratory distress	1	1	\$75,000	9.0
Development of gangrene or other necrotizing condition	1	1	\$733,000	9.0
Staph infection contracted during care	1	1	\$1,155,850	9.0
Other infection contracted during care	1			4.0
Subtotal	276	143	\$563,228	6.5
Diagnostic Allegations - Non-infectious Conditions				
Cardiovascular Conditions				
Heart Condition	238	135	\$422,673	7.9
Stroke	170	84	\$562,310	6.6
Embolism/ thrombosis	102	59	\$387,352	7.3
Hematoma / aneurysm	59	35	\$526,475	8.1
Ischemia / vascular deficiency	9	6	\$686,167	7.0
Transient cerebral ischemic attacks and related	2	1	\$815,000	7.0
Subtotal	342	185	\$505,116	7.1
Cancers				
Breast	127	54	\$452,600	7.1
Respiratory	109	53	\$372,249	7.9

Allegations, 2005-2018				
Allegation	Claimants	Claimants Receiving Pmt	Avg Payment	Avg. Injury Severity (1-9)
Digestive	81	37	\$509,192	7.2
Unknown or benign neoplasms	52	25	\$384,817	5.4
Skin	50	26	\$461,043	6.2
Reproductive organs	41	20	\$389,693	7.8
Unknown type	36	18	\$246,452	6.4
Kidney, bladder and related	31	16	\$611,057	6.5
Thyroid and other endocrine glands	27	13	\$336,602	6.3
Bone and Cartilage	24	13	\$473,567	7.3
Oral	20	5	\$181,000	7.2
Central nervous system	14	10	\$233,570	7.9
Hodgkin's, lymphoma, and related	11	3	\$604,500	7.4
Mesothelial and soft tissue	2			7.5
Subtotal	625	293	\$417,101	7.0
Traumatic Injuries				
Fracture	193	58	\$127,906	3.8
Injury to internal organs	66	32	\$376,469	7.2
Spine	45	20	\$1,020,092	5.8
Injury to tendons or muscle	40	10	\$86,433	6.2
Poison, exposure to toxin	9	4	\$111,000	5.7
Dislocation w/out fracture	6	4	\$318,750	4.8
Neurological injury	4	4	\$96,604	4.3
Cuts, burns, abrasions	3	1	\$200,000	3.3
Details unknown	3	1	\$170,000	3.7
Peripheral nervous system	3			4.0
Sprains or other soft tissue injury	1			3.0
Subtotal	373	134	\$322,441	5.0
Nervous system disorders				
Spine / spinal cord disorder	54	22	\$948,697	5.9
Meningitis, encephalitis, and inflammatory conditions of central nervous system	8	2	\$1,217,500	7.1
Multiple sclerosis	1			2.0
Epilepsy and related syndromes	4	1	\$250,000	7.5
Nerve root and plexus disorders	1			3.0
Guillain-Barre and related syndromes	2			6.0
Cerebral palsy	1	1	\$75,000	6.0
Hydrocephalus	5	1	\$950,000	7.2

Allegations, 2005-2018				
Allegation	Claimants	Claimants Receiving Pmt	Avg Payment	Avg. Injury Severity (1-9)
Subtotal	76	27	\$910,420	6.1
Misc.				
Digestive disorders	185	91	\$398,247	5.8
Healthy patient misdiagnosed with condition	80	34	\$155,421	3.5
Diseases of the genitourinary system	35	18	\$485,139	5.9
Diseases of the reproductive system	30	14	\$240,446	5.0
Endocrine, nutritional, and metabolic disorders	26	16	\$956,208	7.6
Visual condition	23	13	\$535,084	5.9
Musculoskeletal disorder order- excluding spine	22	8	\$1,511,250	4.2
Blood and immune disorders	15	10	\$579,417	6.9
Diabetes	14	8	\$344,388	6.4
Compartment syndrome	12	9	\$256,666	5.3
Other respiratory conditions	7	4	\$839,928	6.4
Auditory condition	3	1	\$45,000	4.7
Respiratory infections	3	2	\$200,000	9.0
Development of septic condition during care	2	1	\$350,000	9.0
Integumentary system - skin, hair, nails etc	1	1	\$125,000	4.0
Other respiratory distress	1			9.0
Development of fistula	1	1	\$35,000	3.0
Allergic reaction to medical materials, excluding medications	1			6.0
Staph infection contracted during care	1			9.0
Other infection contracted during care	1	1	\$140,000	5.0
Accidental or unnecessary sterilization	1	1	\$1,032	5.0
Delay in Emergency Department	1	1	\$300,000	9.0
Subtotal	465	234	\$442,667	5.5
Unknown	185	79	\$412,251	6.0
All Diagnostic-related Claims	2,342	1,095	\$456,748	6.2
Anesthesia Related Allegations				
Intubation Problem				
Injury during intubation	143	34	\$62,807	3.2
Failure to timely / properly intubate	12	11	\$596,000	8.6
Premature extubation	10	8	\$478,468	7.8
Endotracheal tube wrongly placed	2	1	\$175,000	3.0
Subtotal	167	54	\$235,077	3.8
Administration Error				

Allegations, 2005-2018				
Allegation	Claimants	Claimants Receiving Pmt	Avg Payment	Avg. Injury Severity (1-9)
Wrong dosage administered	8	4	\$451,979	5.5
Wrong medication administered	2	2	\$17,500	3.0
Injection into wrong body part	1			4.0
Unknown Error	1	1	\$2,304	3.0
Subtotal	12	7	\$263,603	4.8
Respiratory / cardiovascular complication				
Hypoxia	19	10	\$1,243,000	7.0
Other respiratory distress	13	7	\$459,528	7.4
Ischemia / vascular deficiency	5	4	\$504,250	6.6
Myocardial infarction	2			6.0
Hematoma / aneurysm	1	1	\$300,000	9.0
Stroke	1			7.0
Subtotal	41	63	\$285,138	7.1
Misc.				
Other negative side-effect of medications	13	3	\$306,667	4.5
Anesthetic or intra-operative awareness	12	7	\$42,861	1.3
Other inadequate anesthetization	12	8	\$435,199	6.8
Allergic reaction to medication	9	4	\$296,271	4.6
Injury from equipment malfunction	3	2	\$55,000	7.0
Cut, puncture, tear during injection	2	1	\$690,000	5.5
Injury from aspiration	2	1	\$25,000	5.5
Pathology specimen lost	1			3.0
Subtotal	54	26	\$258,142	4.5
Unknown	2	1	\$30,000	9.0
Total - Anesthesia Related Allegations	276	151	\$259,899	4.5
Surgery Related				
Cardiovascular / Respiratory Complications of Surgery				
Postoperative bleeding	111	53	\$580,201	6.9
Embolism/ thrombosis	83	45	\$256,285	7.2
Ischemia / vascular deficiency	60	31	\$695,847	6.8
Myocardial infarction	58	28	\$435,381	8.0
Hypoxia	40	23	\$1,019,069	7.9
Hematoma / aneurysm	32	24	\$528,660	6.8
Stroke	32	12	\$266,038	6.8
Excess blood loss during surgery or treatment	19	8	\$875,486	6.9
Other respiratory distress	19	10	\$369,650	7.5

Allegations, 2005-2018				
Allegation	Claimants	Claimants Receiving Pmt	Avg Payment	Avg. Injury Severity (1-9)
Injury from aspiration	17	5	\$165,613	6.4
Subtotal	471	239	\$530,932	7.2
Complications With Implanted Prosthetic, Therapeutic or Other Devices				
Improper placement of prosthetic device	184	74	\$393,558	4.7
Incorrect prosthetic device, or wrong size	76	25	\$177,650	4.2
Improper placement of therapeutic device	73	31	\$302,336	5.5
Defective implant	28	6	\$76,896	4.3
Incorrect therapeutic device, or wrong size	6	2	\$338,500	4.8
Failure to introduce or remove medical implement	3	1	\$70,000	3.7
Subtotal	370	139	\$317,592	4.7
Informed Consent Issues / Unnecessary Treatment				
Treatment lacked salutary effect	355	96	\$171,079	4.3
Unnecessary surgery or procedure	141	48	\$307,099	4.6
Did not consent to procedure	18	6	\$128,333	4.1
Failure to warn of risks of procedure	7	3	\$75,833	3.7
Subtotal	521	153	\$210,208	4.4
Surgical Trauma				
Cut, puncture, tear during surgery	890	485	\$330,445	5.5
Other surgical injury - nerve injury	120	46	\$365,305	5.0
Injury from patient positioning	59	25	\$250,327	4.3
Other injury incidental to medical procedure	37	18	\$261,361	4.6
Cut, puncture, tear during heart catheterization	35	14	\$761,174	6.4
Other surgical injury - internal organ	34	10	\$183,472	5.2
Injury from equipment malfunction	32	13	\$141,282	5.7
Other surgical injury - central nervous system	20	12	\$1,161,250	6.9
Other surgical injury - impaired vision	15	8	\$264,375	4.9
Other surgical injury - fracture	13	3	\$22,833	3.8
Other surgical injury - peripheral nervous system	11	6	\$547,079	5.5
Cut, puncture, tear during injection	11	4	\$82,500	4.9
Injury from improper operation of equipment	8	5	\$170,815	5.1
Other surgical injury - morphology problem / disfigurement	7	4	\$325,000	5.4
Other surgical injury - non-fracture musculoskeletal injury	3			5.0
Other surgical injury - veins or arteries	1	1	\$202,000	9.0
Cut, puncture, tear during endoscopic exam	1			5.0
Cut, puncture, tear during other catheterization	1			6.0

Allegations, 2005-2018				
Allegation	Claimants	Claimants Receiving Pmt	Avg Payment	Avg. Injury Severity (1-9)
Subtotal	1298	654	\$343,192	5.4
Surgical Infections				
Other infection contracted during care	421	139	\$347,739	5.1
Staph infection contracted during care	54	16	\$295,537	5.1
Development of septic condition during care	45	16	\$630,932	6.7
Development of gangrene or other necrotizing condition	20	7	\$371,429	5.5
Pressure ulcers during care	7	2	\$65,000	3.1
Subtotal	547	180	\$366,051	5.2
Problems with Surgical Site				
Other improper closure of surgical site	79	37	\$406,073	5.2
Sutures, staples, etc improperly placed	58	32	\$596,305	5.2
Development of fistula	43	17	\$436,212	4.5
Other problem with surgical site	27	8	\$146,563	3.7
Failure in suture or ligature	4	1	\$225,000	5.3
Subtotal	211	95	\$451,785	4.9
Misc. Surgical Issues				
Foreign body retained - surgery related	306	176	\$116,811	4.0
Misset fracture or non-union	130	50	\$210,833	4.3
Procedure performed on wrong body part	118	91	\$299,079	4.3
Inappropriate handling of transplantable material	42	39	\$174,602	6.2
Aborted surgery	28	11	\$58,668	3.5
Failure to identify or treat compartment syndrome	26	15	\$579,507	6.2
G-tube or feeding tube improperly placed or malfunction	26	18	\$246,920	7.5
Other problem in post-surgical care	16	5	\$426,000	6.3
Allergic reaction to medical materials, excluding medications	15	3	\$185,500	3.3
Failed sterilization	13	6	\$68,500	1.8
Retained body part	11	5	\$73,000	3.4
Inappropriate temperature in local application	9	7	\$105,213	4.0
Contaminated substance taken or injected	7	3	\$213,333	3.0
Accidental or unnecessary sterilization	6			5.0
Foreign body retained - during heart catheterization	4	2	\$790,000	3.5
Non-administration of necessary care	2	1	\$10,000	4.0
Failure to stabilize prior to transfer / discharge	2	1	\$225,000	9.0
Wrong patient	2	1	\$122,000	5.0

Allegations, 2005-2018				
Allegation	Claimants	Claimants Receiving Pmt	Avg Payment	Avg. Injury Severity (1-9)
Physician delay or failure to respond to call	1	1	\$5,500	3.0
No clear allegation of medical injury	1			1.0
Wrong fluid used in transfusion	1	1	\$175,000	6.0
Pathology specimen lost	1			1.0
Failure to ensure proper nutrition or hydration	1			5.0
Subtotal	768	436	\$196,938	4.4
Unknown	363	127	\$291,255	4.9
Total Surgery Related Allegations	4,549	2,023	\$325,907	5.1
Allegations Related to Medication				
Dosage / Medication Errors				
Wrong medication administered	263	187	\$43,950	3.3
Wrong dosage administered	260	176	\$221,333	5.1
Medication error	12	7	\$117,000	4.4
Medication administered via the wrong route	7	5	\$1,351,996	5.9
Incorrect dilution of fluid	2			8.5
Agent use or selection error	1	1	\$1,200,000	9.0
Injury from improper operation of equipment	1			3.0
Injury from equipment malfunction	1	1	\$1,250,000	7.0
Administered to wrong patient	1	1	\$25,000	3.0
Subtotal	548	378	\$151,395	4.2
Adverse Reaction to Correct Medication & Dose				
Cognitive & affective disorders	110	2	\$55,000	4.5
Anticoagulants	64	25	\$305,029	5.8
Weight loss medications	31			3.5
Pain management, narcotics	31	9	\$126,068	6.3
Antibiotics	27	10	\$387,300	5.0
Pain management, non-narcotics	16	1	\$100,000	6.1
Steroids	15	7	\$105,714	4.2
Heart medications	11	3	\$172,500	7.8
Cholesterol agents	9	1	\$100,000	4.3
Digestives medications	8	3	\$312,500	5.5
Anti-seizure medications	7	3	\$355,000	5.1
Chemotherapy	7	1	\$5,000	7.3
Diabetic medications	7	2	\$35,500	5.0
Hypertension medications	6			5.0
Anti-inflammatory, excluding steroids	6			4.8

Allegations, 2005-2018				
Allegation	Claimants	Claimants Receiving Pmt	Avg Payment	Avg. Injury Severity (1-9)
Sedatives & relaxants	5	2	\$267,500	6.0
Anti-parasitic agents	4	1	\$40,000	4.5
Adrenaline & related	3	2	\$525,000	5.3
Hormonal treatments	3			4.7
Immune medications	3	1	\$325,000	5.3
Antiviral agents	3	3	\$773,667	4.7
Vaccines	2			6.0
Topical applications	1			3.0
Substance abuse treatment	1			9.0
Antifungal agents	1			5.0
Subtotal	380	76	\$270,399	5.1
Misc. Medication-related Allegations				
Other negative side-effect of medications	115	25	\$198,303	4.9
Allergic reaction to medication	81	38	\$153,367	4.5
Interaction of two or more medications	48	25	\$250,450	6.4
Injury from excessive use of medication	38	17	\$211,544	5.8
Addiction or withdrawal issues	25	9	\$1,808,620	3.6
Accident attributed to medicine	10	2	\$5,512	5.0
Injection into wrong body part	4	2	\$1,293,750	6.3
Premature cessation of medications	2	1	\$100,000	3.0
All acts of self-harm	1			9.0
Cut, puncture, tear during injection	1			3.0
Unnecessary surgery or procedure	1	1	\$60,331	3.0
Excess blood loss during surgery or treatment	1	1	\$183	9.0
Other Delay	1			2.0
Other failure to effectively treat	1	1	\$215,000	9.0
Subtotal	329	122	\$327,005	5.0
Unknown	9	3	\$122,167	6.0
Total - Medication Related Allegations	1,266	579	\$203,866	4.7
IV & Blood Products				
IV infiltration event	135	76	\$122,956	6.4
Cut, puncture, tear during injection	32	14	\$57,573	3.6
Incorrect blood type	10	9	\$759,667	7.1
Embolism/ thrombosis	9	4	\$285,275	3.9
Other infection contracted during care	7	5	\$45,060	3.9
Staph infection contracted during care	6	3	\$678,667	5.0

Allegations, 2005-2018				
Allegation	Claimants	Claimants Receiving Pmt	Avg Payment	Avg. Injury Severity (1-9)
Excessive amount of blood or other fluid	4	1	\$275,000	6.8
Contaminated substance taken or injected	4	2	\$82,500	3.5
Injection into wrong body part	3	3	\$79,167	4.7
Foreign body retained - during injection	3	3	\$21,667	3.7
Inappropriate temperature in local application	2	2	\$77,500	4.5
Failure to identify or treat compartment syndrome	2			4.0
Wrong dosage administered	1	1	\$125,000	3.0
Wrong medication administered	1	1	\$19,500	4.0
Other negative side-effect of medications	1			9.0
Cut, puncture, tear during other catheterization	1			3.0
Cut, puncture, tear during other medical procedure	1			2.0
Incorrect dilution of fluid	1	1	\$54,000	4.0
Development of septic condition during care	1			9.0
Injury from improper operation of equipment	1			3.0
Subtotal	225	125	\$171,889	5.6
Unknown	4	1	\$20,000	4.3
Total - IV & Blood Products	229	126	\$170,683	5.6
Pregnancy & Childbirth				
Intrauterine hypoxia	130	83	\$1,592,955	7.5
Shoulder dystocia	99	54	\$599,675	5.8
Complications of placental disorders	55	28	\$1,416,883	9.6
Spontaneous abortion / stillbirth	52	26	\$223,472	7.7
Infections	42	18	\$1,252,111	6.1
Cut, tear, perforation	29	10	\$755,223	4.3
Retained surgical or other material	29	18	\$147,226	3.6
Ectopic pregnancy	27	10	\$140,900	4.3
Pre-term labor	24	9	\$418,836	7.0
Other birth injuries to central nervous system	22	14	\$810,201	7.3
Birth injury to peripheral nervous system	22	13	\$466,154	19.7
Eclampsia	19	9	\$1,951,275	7.3
Complications from disproportion	17	10	\$817,973	5.7
Injury to fetus or mother due to procedure unrelated to pregnancy	16	4	\$94,250	6.8
Intracranial laceration or hemorrhage due to birth injury	13	6	\$682,917	6.1
Cardiovascular complications of pregnancy	11	5	\$1,193,743	8.0
Fetal abnormality or damage	10	4	\$668,750	6.9

Allegations, 2005-2018				
Allegation	Claimants	Claimants Receiving Pmt	Avg Payment	Avg. Injury Severity (1-9)
Other obstructed labor	9	6	\$168,333	6.4
Prolonged labor	8	5	\$1,213,800	6.6
Fetus / newborn affected by maternal condition unrelated to pregnancy	8	4	\$873,750	7.6
Complications w/ abortion	7	3	\$43,333	5.4
Other injury incidental to medical procedure	7	2	\$475,000	6.9
Other inadequate anesthetization	5	2	\$26,450	2.4
Development of gangrene or other necrotizing condition	5	2	\$1,062,500	5.8
Complications of gestational diabetes	4	2	\$237,500	8.8
Complications of multiple gestation	4	1	\$300,000	8.5
Other obstetric trauma	4	2	\$275,000	7.0
Postpartum hemorrhage	4	2	\$475,000	7.0
Failure to stabilize prior to transfer / discharge	4	2	\$75,000	7.5
RH Isoimmunization	3	3	\$1,757,553	6.0
Failed induction of labor	3	3	\$2,227,575	7.0
Umbilical cord complications	3	1	\$175,000	7.0
Retained placenta and membranes	3			3.3
Other birth injuries	3	3	\$471,667	7.0
Development of fistula	3			4.3
Postoperative bleeding	3	1	\$25,000	6.7
Other maternal complications related to pregnancy	2	2	\$210,000	9.0
Other fetal problems	2			9.0
Deficient fetal growth rate	2	1	\$400,000	7.0
Pulmonary hemorrhage originating in the perinatal period	2	2	\$487,500	8.5
Seizure disorder of infant	2	1	\$100,000	7.0
Reaction to medication	2	1	\$50,000	9.0
Other improper closure of surgical site	2	1	\$7,500	3.0
Unnecessary surgery or procedure	2	1	\$150,000	9.0
Other problem with surgical site	2			5.0
Failed resuscitation	2	2	\$395,000	9.0
Retained body part	2			4.5
Breach of patient confidentiality	1	1	\$10,000	1.0
Not applicable, no allegation of medical injury	1	1	\$7,500	1.0
Complications w hypertension	1			6.0
Complications from prolonged pregnancy	1	1	\$85,000	5.0

Allegations, 2005-2018				
Allegation	Claimants	Claimants Receiving Pmt	Avg Payment	Avg. Injury Severity (1-9)
Respiratory distress of newborn	1	1	\$300,000	9.0
Hemolytic disease of fetus or newborn	1			9.0
Kernicterus	1	1	\$3,000,000	8.0
Neonatal Jaundice	1	1	\$3,850,000	7.0
Metabolic / endocrine disorders of fetus or newborn	1	1	\$250,000	7.0
Mix-up of newborn at discharge	1			1.0
Wrong dosage administered	1			2.0
Inappropriate temperature in local application	1	1	\$10,000	3.0
Improper placement of therapeutic device	1			2.0
Failure to identify or treat compartment syndrome	1			3.0
Sutures, staples, etc. improperly placed	1	1	\$85,000	3.0
Other respiratory distress	1			4.0
Development of septic condition during care	1	1	\$450,000	9.0
Failure to timely / properly intubate	1	1	\$300,000	7.0
Physician delay or failure to respond to call	1	1	\$1,725,000	7.0
Injury from patient positioning	1			1.0
Injury from improper operation of equipment	1	1	\$93,000	5.0
Injury from equipment malfunction	1			3.0
Other injury unrelated to medical treatment	1	1	\$16,500	3.0
Subtotal	752	390	\$890,163	7.0
Unknown	125	56	\$552,613	6.8
Total - Pregnancy & Childbirth	877	446	\$847,780	7.0
Allegations Related to Non-Surgical Treatment				
Cardiovascular / Respiratory Complications				
Myocardial infarction	41	20	\$405,417	8.0
Embolism/ thrombosis	30	14	\$656,476	5.6
Injury from aspiration	28	13	\$330,794	7.6
Stroke	28	9	\$706,111	7.0
Other respiratory distress	16	9	\$523,611	8.1
Hematoma / aneurysm	13	6	\$147,208	7.7
Hypoxia	11	7	\$303,714	8.6
Ischemia / vascular deficiency	9	3	\$391,667	6.7
Subtotal	176	81	\$454,952	7.3
Allegations Related to Medical & Biological Agents (Excluding Medication)				
Overdose of radiation during therapy	81	67	\$362,791	5.8

Allegations, 2005-2018				
Allegation	Claimants	Claimants Receiving Pmt	Avg Payment	Avg. Injury Severity (1-9)
Allergy to medical materials, excluding medications	26	11	\$62,426	4.0
Wrong dosage administered	6	2	\$683,354	4.0
Dosage failure in electroshock therapy	5	3	\$543,167	4.8
Wrong fluid used in transfusion	5	5	\$287,000	4.8
Failure of sterile precautions	4	2	\$25,500	2.8
Incorrect dilution of fluid	3	2	\$47,500	4.0
Excessive amount of blood or other fluid	2	1	\$230,000	6.5
Inadvertent exposure to radiation	2	2	\$42,500	6.5
Contaminated substance taken or injected	2			3.5
Subtotal	136	95	\$314,588	5.4
Problems With Equipment and Devices				
Injury from improper operation of equipment	31	20	\$79,941	4.9
Improper placement of therapeutic device	25	13	\$153,390	4.3
Injury from equipment malfunction	18	11	\$203,909	5.7
Feeding tube improperly placed or malfunction	13	5	\$1,875,000	7.5
Improper placement of prosthetic device	9	2	\$47,500	3.3
Incorrect therapeutic device, or wrong size	4	1	\$43,500	3.0
Incorrect prosthetic device, or wrong size	3	2	\$6,000	2.7
Defective implant	1			5.0
Subtotal	104	54	\$284,470	5.0
Physical Injuries Resulting from Procedure				
Injury during physical therapy	213	101	\$139,572	3.7
Cut, puncture, tear during injection	131	60	\$236,022	4.4
Cut, puncture, tear during endoscopic exam	108	38	\$290,810	5.1
Cut, puncture, tear during other medical procedure	75	46	\$61,068	3.6
Cut, puncture, tear during other catheterization	57	22	\$190,481	4.6
Other injury incidental to medical procedure	41	20	\$46,441	3.6
Inappropriate temperature in local application	25	20	\$30,413	3.6
Injury from patient positioning	12	1	\$150,000	3.7
Injection into wrong body part	8	4	\$227,500	5.8
Injury during intubation	5	3	\$94,333	3.8
Extravasation from injection	5	4	\$63,802	3.2
Subtotal	680	319	\$154,996	4.1
Infections and Related				
Pressure ulcers during care	331	206	\$191,615	7.3
Other infection contracted during care	184	72	\$238,633	6.5

Allegations, 2005-2018				
Allegation	Claimants	Claimants Receiving Pmt	Avg Payment	Avg. Injury Severity (1-9)
Development of septic condition during care	33	17	\$516,740	7.7
Development of gangrene or other necrotizing condition	22	10	\$311,065	5.7
Staph infection contracted during care	18	3	\$20,083	3.8
Subtotal	588	308	\$222,759	6.9
Retention of Foreign Object				
During other medical procedure	15	8	\$74,670	3.1
During injection	3			3.0
During endoscopic exam	1	1	\$35,000	3.0
During other catheterization	1			3.0
Subtotal	20	9	\$70,262	3.1
Delays and Other Omissions				
Nonadministration of necessary care	168	76	\$302,057	6.5
Failure to stabilize prior to transfer / discharge	34	17	\$365,416	7.4
Failure to timely / properly intubate	29	21	\$542,286	8.4
Delay in Emergency Department	25	10	\$604,132	5.7
Failure to ensure proper nutrition or hydration	21	9	\$649,963	7.7
Other Delay	16	6	\$381,970	6.4
Failure in follow-up care	15	4	\$356,250	6.2
Failure to monitor	12	7	\$437,071	7.8
Failure to make timely or appropriate referral	12	6	\$299,167	6.0
Delay in scheduling surgery	10	6	\$306,601	8.3
Delay in transport	9	4	\$402,069	7.3
Nonadministration of necessary drug	6	2	\$162,500	7.7
Physician delay or failure to respond to call	3	2	\$154,250	9.0
Failure to communicate with patient	4	1	\$50,000	7.3
Deficient monitoring of patient status	2	2	\$253,449	5.0
Subtotal	366	173	\$379,520	6.8
Misc.				
Treatment lacked salutary effect	123	42	\$200,702	5.7
Misset fracture or non-union	58	24	\$121,790	4.1
Other failure to effectively treat	29	13	\$161,236	6.6
Unnecessary surgery or procedure	18	6	\$101,917	3.5
Failed resuscitation	14	8	\$414,875	8.8
Did not consent to procedure	9	3	\$6,667	2.1
Not applicable, no allegation of medical injury	8	4	\$22,063	1.6

Allegations, 2005-2018				
Allegation	Claimants	Claimants Receiving Pmt	Avg Payment	Avg. Injury Severity (1-9)
Failure to identify or treat compartment syndrome	8	6	\$202,850	4.9
Sutures, staples, etc. improperly placed	7	2	\$3,750	3.0
Procedure performed on wrong body part	5	3	\$678,333	3.6
Wrong patient	5	4	\$85,000	4.2
Inappropriate handling of transplantable material	4	1	\$20,000	1.0
Aborted surgery	4	1	\$12,500	3.0
Performance of inappropriate operation or procedure	3	2	\$67,000	4.3
Pathology specimen lost	3	3	\$7,500	1.7
Failure to warn of risks of procedure	2			2.5
Other problem with surgical site	2			2.5
Failed sterilization	2			1.5
Improper phone of other remote instructions	2	2	\$150,000	6.0
Premature extubation	2	1	\$175,000	6.5
All acts of self-harm	1			9.0
Patient harmed third party	1			9.0
Allergic reaction to medication	1			3.0
Incorrect blood type	1			3.0
Development of fistula	1	1	\$123,000	6.0
Postoperative bleeding	1	1	\$225,000	6.0
Subtotal	314	127	\$174,007	4.9
Unknown	219	73	\$290,569	5.3
Total - Non-surgical Treatment	2,603	1,239	\$250,001	5.6
Patient Safety / Legal / Ethical Issues				
Fall while under care or on premises	944	573	\$129,372	4.9
Civil rights originating among incarcerated population	385	33	\$311,089	3.2
Injury during transporting or repositioning	160	104	\$97,873	4.2
Other injury unrelated to medical treatment	113	80	\$121,082	5.1
Breach of patient confidentiality	105	55	\$64,132	1.1
Other legal or ethical misconduct	93	28	\$106,042	1.3
All acts of self-harm	72	38	\$272,935	8.3
Sexual misconduct	56	24	\$102,344	1.3
Harmed by 3rd party	53	30	\$100,995	4.3
Assault & battery	31	17	\$136,000	2.6
Failure to warn of health hazard	28	2	\$8,750	5.7
False imprisonment	25	6	\$17,821	1.3

Allegations, 2005-2018				
Allegation	Claimants	Claimants Receiving Pmt	Avg Payment	Avg. Injury Severity (1-9)
Breach of specific regulation	20	5	\$296,990	1.8
Refusal to treat / indifference	20	1	\$760,000	3.9
Injury from aspiration	15	7	\$507,857	8.1
Insurance coverage or monetary dispute	14	2	\$224,116	1.2
Elopement from facility	14	12	\$366,513	6.6
Not applicable, no clear allegation of medical injury	13	4	\$23,250	1.3
Patient abandonment	6	1	\$153,255	2.8
Abuse / neglect	6	2	\$181,250	6.3
Injury while restraining patient or by security	6	3	\$103,352	4.2
Patient harmed third party	5	1	\$20,000	3.2
Other respiratory distress	5	4	\$359,583	9.0
Religious issues	3	2	\$31,250	2.3
Wrongful life / birth	3	1	\$45,000	1.0
EMTALA violation	3	2	\$16,000	2.3
Failure to ensure proper nutrition or hydration	3	1	\$2,500	7.3
Did not consent to procedure	2	1	\$9,000	1.0
Injury during physical therapy	2			3.0
Subtotal	2,205	1,039	\$136,888	4.1
Unknown	10	3	\$241,667	3.7
Total - Patient Safety / Legal - Ethical Issues	2,215	1,042	\$137,189	4.1

Injury / Outcomes, 2005-2018

Injury / Outcomes, 2005-2018				
Outcome	Claimants	Claimants With Payment	Average Payment	Avg. Injury Severity (1-9)
Emotional distress	607	203	\$91,423	1.1
Physical pain, little loss of function	226	83	\$39,027	2.5
Subtotal	833	286	\$76,217	1.5
Tissue and Musculoskeletal Injuries				
Burns, lacerations, or other skin damage	566	312	\$62,612	3.3
Soft tissue injury	46	21	\$78,511	3.3
Fracture caused from error	584	334	\$84,205	3.5
Other skeletal caused from error	309	115	\$79,921	3.4
Fracture complicated by error	225	68	\$85,923	4.2
Skeletal problem complicated by error	279	66	\$189,162	3.7
Partial loss of function of limb	62	33	\$328,818	5.2
Full loss of function of limb	24	15	\$407,700	5.9
Amputation of fingers/toes	71	33	\$137,443	5.1
Amputation of hands/feet	35	14	\$511,372	5.7
Amputation of one limb	162	91	\$520,875	6.1
Amputation of two or more limbs	13	7	\$559,769	7.1
Loss of other body part	195	90	\$449,870	7.2
Disfigurement / cosmetic	49	21	\$149,377	4.0
Other morphology problem	431	160	\$190,785	4.4
Subtotal	3,051	1,380	\$167,360	4.2
Neurological / nervous system impairment				
Cut, perforation, or tear of nerve	42	22	\$266,625	5.3
Other damage to nerve	676	292	\$299,442	5.7
ERBS palsy	24	13	\$430,962	6.0
Cauda equine syndrome	16	9	\$634,169	6.0
Brachial plexus disorders	78	45	\$469,024	5.7
Cerebral palsy	64	49	\$1,994,038	7.6
Monoplegia - lower limb	3	1	\$30,000	6.0
Hemiplegia	21	11	\$1,127,273	6.8
Paraplegia	120	76	\$1,404,544	7.0
Quadriplegia	47	34	\$1,885,203	8.0
Cognitive or neurological deficits	572	306	\$1,179,414	6.3

Other nervous system impairment	6	2	\$175,000	4.8
Subtotal	1,669	860	\$892,965	6.1
Cardiovascular/ circulatory outcomes				
Damage to veins or arteries	22	8	\$138,773	4.3
Internal bleeding	158	53	\$328,351	4.1
Embolism/thrombosis	64	20	\$108,575	4.0
Ruptured aneurism	4	1	\$1,375	5.3
Stroke	136	71	\$719,211	6.1
Myocardial infarction	63	24	\$313,075	4.8
Ischemic or anoxic event	2	1	\$5,000	4.5
Subtotal	449	178	\$445,328	4.8
Contraction or progression of infection while under care				
Contraction of staph infection	58	14	\$59,703	3.6
Progression of staph infection	11	4	\$62,750	3.8
Contraction of meningitis	12	2	\$840,000	4.9
Progression of meningitis	11	7	\$1,025,429	6.1
Contraction of encephalitis	1			4.0
Progression of encephalitis	2	1	\$1,025,000	6.5
Contraction of peritonitis	17	10	\$308,050	4.6
Contraction of hepatitis	5	1	\$50,000	4.4
Progression of hepatitis	11			2.0
Progression of cancer	389	182	\$413,704	6.1
Contraction of sepsis	64	34	\$599,756	9.1
Progression of sepsis	4	3	\$366,498	5.0
Contraction of gangrene / necrotizing condition	34	20	\$304,509	4.7
Progression of gangrene / necrotizing condition	1			4.0
Contraction of other / unknown infection	528	192	\$184,431	4.4
Progression of other / unknown infection	160	42	208,117	3.3
Subtotal	1,308	512	\$314,702	5.0
Damage to internal organs				
Cut, perforation, tear to internal organ	531	223	\$300,909	4.4
Leakage from internal organ	48	26	\$169,781	4.0
Temporary partial loss of organ	89	26	\$119,201	3.5
Temporary full loss of organ	19	8	\$166,563	3.9
Permanent partial loss of organ	288	92	\$633,096	5.3
Permanent full loss of organ	29	18	\$702,326	9.4
Subtotal	1,004	393	\$373,627	4.7
Hearing and vision loss				
Partial loss of vision	174	73	\$258,150	5.3
Full loss of vision	45	26	\$770,217	6.7

Partial loss of hearing	40	17	\$213,735	4.9
Full loss of hearing	2	2	\$1,037,500	6.0
Subtotal	261	118	\$377,789	5.5
Misc.				
Partial loss of mobility	8	2	\$187,500	5.1
Respiratory distress	78	34	\$156,537	3.8
Accidental / unnecessary sterilization	14	3	\$236,250	6.0
Coma	10	5	\$930,000	5.7
Injury primarily psychological	16	7	\$103,450	2.1
Malnutrition / dehydration	4	3	\$31,467	2.8
Legal or ethical issue	7	3	\$13,833	2.1
Unnecessary surgery - no complications	81	27	\$172,825	4.0
Unnecessary surgery - complications	13	2	\$87,500	4.0
Additional surgery necessary	894	402	\$142,643	4.3
Wrong site surgery	1	1	\$1,000,000	5.0
Unknown	2,023	745	\$146,868	3.3
Subtotal	3,145	1,231	\$149,815	3.6
Death	3,469	1,994	\$310,100	9.0

Section IX

Premium and Loss Data by Company

This section contains the written premium, earned premium, paid losses, incurred losses, market share and loss ratio of all licensed medical malpractice writers in Missouri (i.e. excluding excess and surplus lines carriers). The data were derived from the Missouri Supplement to the Annual Statement. Data are presented for five market segments:

Physicians & Surgeons

Hospitals

Dentists

Nurses

All Other

The reports are presented in descending order of market share by company. The data presented in this exhibit is independent from the claim data used in the preceding tables.

Yotal Malpractice Premium and Losses, 2018					
Insurer	Premium Written	Market Share	Premium Earned	Incurred Losses	Loss Ratio
Missouri Hospital Plan	\$27,721,220	25.1%	\$26,918,268	\$11,594,059	43.1%
Medical Protective Company	\$14,288,311	12.9%	\$16,139,221	\$2,563,543	15.9%
Medical Liability Alliance	\$11,613,515	10.5%	\$11,077,106	\$7,629,700	68.9%
Norcal Mutual Insurance Company	\$9,758,530	8.8%	\$10,412,316	\$13,454,875	129.2%
Proassurance Indemnity Company	\$8,037,005	7.3%	\$8,500,528	\$1,352,693	15.9%
Doctors Company An Interins Exchange	\$7,807,974	7.1%	\$7,822,760	\$1,994,207	25.5%
Physicians Standard Insurance Company	\$5,148,594	4.7%	\$5,169,715	\$1,991,666	38.5%
Missouri Doctors Mutual Insurance Co	\$3,632,231	3.3%	\$3,682,321	\$2,119,019	57.5%
MMIC Insurance	\$3,191,731	2.9%	\$2,852,742	\$372,357	13.1%
Keystone Mutual Insurance Company	\$2,522,941	2.3%	\$2,324,655	\$1,876,326	80.7%
American Casualty Co of Reading PA	\$2,507,566	2.3%	\$2,465,742	\$1,690,485	68.6%
Health Care Indemnity Inc	\$2,107,816	1.9%	\$2,107,816	\$2,255,104	107.0%
NCMIC Insurance Company	\$1,720,504	1.6%	\$1,719,347	\$143,534	8.3%
Preferred Physicians Medical RRG	\$1,650,064	1.5%	\$1,630,905	\$1,497,271	91.8%
Pharmacists Mutual Insurance Company	\$1,182,633	1.1%	\$1,232,506	\$49,530	4.0%
Physicians Insurance Mutual	\$1,122,996	1.0%	\$1,071,243	\$197,000	18.4%
Liberty Insurance Underwriters	\$868,049	0.8%	\$859,792	\$1,203,331	140.0%
Professional Solutions Insurance Company	\$686,365	0.6%	\$631,838	\$347,585	55.0%
Fair American Insurance & Reinsurance Co	\$637,093	0.6%	\$647,656	\$205,406	31.7%
Preferred Professional Insurance Company	\$540,545	0.5%	\$472,728	\$144,231	30.5%
Ace American Insurance Company	\$502,372	0.5%	\$471,266	\$34,317	7.3%
Podiatry Insurance Company Of America	\$351,626	0.3%	\$356,578	\$73,671	20.7%
Cincinnati Insurance Company The	\$346,139	0.3%	\$374,207	\$179,457	48.0%
Church Mutual Insurance Company	\$332,345	0.3%	\$263,122	\$81,872	31.1%
Kansas Medical Mutual Insurance Co	\$320,220	0.3%	\$319,977	-\$131,734	-41.2%
Allied World Insurance Company	\$304,599	0.3%	\$295,708	\$77,062	26.1%
Continental Casualty Company	\$201,439	0.2%	\$364,540	\$969,029	265.8%
Aspen American Insurance Company	\$192,961	0.2%	\$122,344	\$36,576	29.9%
Continental Insurance Company The	\$177,035	0.2%	\$112,943	\$45,664	40.4%
Great Divide Insurance Company	\$120,048	0.1%	\$111,383	\$14,303	12.8%

Yotal Malpractice Premium and Losses, 2018					
Insurer	Premium Written	Market Share	Premium Earned	Incurred Losses	Loss Ratio
American Alternative Insurance Corp	\$88,602	0.1%	\$88,487	-\$1,141	-1.3%
Kammco Casualty Company	\$79,754	0.1%	\$79,754	\$0	0.0%
Zurich American Insurance Company	\$78,040	0.1%	\$26,300	\$27,749	105.5%
Medmal Direct Insurance Company	\$77,800	0.1%	\$107,075	\$24,839	23.2%
Ismie Mutual Insurance Company	\$75,082	0.1%	\$37,817	-\$417,165	-1,103.1%
Paco Assurance Company	\$71,124	0.1%	\$77,246	-\$3,197	-4.1%
Doctors Direct Insurance	\$69,550	0.1%	\$67,542	\$26,410	39.1%
Fortress Insurance Company	\$63,192	0.1%	\$63,831	\$984	1.5%
American Home Assurance Company	\$63,139	0.1%	\$62,042	\$22,424	36.1%
National Union Fire Insurance Co Of Pitt.	\$55,483	0.1%	\$134,229	-\$1,079,169	-804.0%
State Farm Fire And Casualty Company	\$41,515	0.0%	\$42,599	-\$189	-0.4%
Cincinnati Casualty Company The	\$25,953	0.0%	\$24,159	\$6,712	27.8%
Berkshire Hathaway Specialty Insurance Co	\$21,613	0.0%	\$65,025	\$36,016	55.4%
Cincinnati Indemnity Company	\$19,597	0.0%	\$21,276	\$5,679	26.7%
Hudson Insurance Company	\$6,766	0.0%	\$6,271	-\$1,149	-18.3%
Beazley Insurance Company	\$5,620	0.0%	\$5,431	-\$11,915	-219.4%
General Insurance Company Of America	\$4,029	0.0%	\$4,564	\$1,602	35.1%
Campmed Casualty & Indemnity Company	\$2,500	0.0%	\$361	\$1,452	402.2%
Granite State Insurance Company	\$2,032	0.0%	\$5,498	-\$4,510	-82.0%
Philadelphia Indemnity Insurance Company	\$1,948	0.0%	\$407	\$97	23.8%

Physicians & Surgeons Malpractice, 2018					
Insurer	Premium Written	Market Share	Premium Earned	Incurred Losses	Loss Ratio
Medical Liability Alliance	\$10,695,073	16.3%	\$10,293,114	\$3,056,963	29.7%
Medical Protective Company	\$10,594,974	16.2%	\$11,576,298	\$2,299,412	19.9%
Norcal Mutual Insurance Company	\$9,758,530	14.9%	\$10,412,316	\$13,454,875	129.2%
Proassurance Indemnity Company	\$7,435,704	11.3%	\$7,899,730	\$1,200,281	15.2%
Doctors Company An Interins Exchange	\$7,241,314	11.0%	\$7,274,179	\$1,886,146	25.9%
Physicians Standard Insurance Company	\$5,148,594	7.8%	\$5,169,715	\$1,991,666	38.5%
Missouri Doctors Mutual Insurance Company	\$3,632,231	5.5%	\$3,682,321	\$2,119,019	57.5%
MMIC Insurance	\$2,717,661	4.1%	\$2,575,681	\$278,280	10.8%
Keystone Mutual Insurance Company	\$2,522,941	3.8%	\$2,324,655	\$1,876,326	80.7%
Preferred Physicians Medical Risk Retention G	\$1,650,064	2.5%	\$1,630,905	\$1,497,271	91.8%
Physicians Insurance Mutual	\$1,122,996	1.7%	\$1,071,243	\$197,000	18.4%
Liberty Insurance Underwriters	\$868,049	1.3%	\$859,792	\$1,203,331	140.0%
Fair American Insurance And Reinsurance Co	\$637,093	1.0%	\$647,656	\$205,406	31.7%
Preferred Professional Insurance Company	\$322,720	0.5%	\$283,637	\$86,539	30.5%
Allied World Insurance Company	\$304,599	0.5%	\$295,708	\$77,062	26.1%
Kansas Medical Mutual Insurance Company	\$294,531	0.4%	\$294,288	-\$121,166	-41.2%
Aspen American Insurance Company	\$192,961	0.3%	\$122,344	\$36,576	29.9%
Medmal Direct Insurance Company	\$77,800	0.1%	\$107,075	\$24,839	23.2%
Continental Insurance Company The	\$76,517	0.1%	\$78,474	\$37,350	47.6%
Ismie Mutual Insurance Company	\$75,082	0.1%	\$37,817	-\$417,165	-1103.1%
Zurich American Insurance Company	\$73,017	0.1%	\$24,607	\$23,177	94.2%
Kammco Casualty Company	\$70,794	0.1%	\$70,794	\$0	0.0%
Doctors Direct Insurance	\$69,550	0.1%	\$67,542	\$26,410	39.1%
Beazley Insurance Company	\$5,620	0.0%	\$5,431	-\$11,915	-219.4%
Cincinnati Insurance Company The	\$3,758	0.0%	\$3,711	\$1,179	31.8%
General Insurance Company Of America	\$2,219	0.0%	\$2,219	\$779	35.1%
Philadelphia Indemnity Insurance Company	\$1,948	0.0%	\$407	\$97	23.8%

Malpractice for Hospitals, 2018					
Insurer	Premium Written	Market Share	Premium Earned	Incurred Losses	Loss Ratio
Missouri Hospital Plan	\$27,721,220	89.8%	\$26,918,268	\$11,594,059	43.1%
Health Care Indemnity	\$2,107,816	6.8%	\$2,107,816	\$2,255,104	107.0%
MMIC Insurance	\$474,070	1.5%	\$277,061	\$94,077	34.0%
Medical Liability Alliance	\$242,457	0.8%	\$153,296	\$100	0.1%
Continental Casualty Company	\$178,938	0.6%	\$179,226	\$518,075	289.1%
American Alternative Insurance Corporation	\$88,602	0.3%	\$88,487	-\$1,141	-1.3%
Proassurance Indemnity Company	\$33,553	0.1%	\$38,006	\$62,855	165.4%
Ace American Insurance Company	\$9,989	0.0%	-\$24,057	-\$35,270	146.6%
Zurich American Insurance Company	\$5,023	0.0%	\$1,693	\$4,572	270.1%

Dentists, 2018					
Insurer	Premium Written	Market Share	Premium Earned	Incurred Losses	Loss Ratio
Medical Protective Company	\$2,852,874	69.8%	\$3,695,214	\$243,622	6.6%
Doctors Company An Interins Exchange	\$538,640	13.2%	\$536,836	\$108,061	20.1%
Proassurance Indemnity Company	\$276,905	6.8%	\$284,081	\$28,241	9.9%
American Casualty Company Of Reading PA	\$106,138	2.6%	\$0	\$1,003	
Cincinnati Insurance Company The	\$103,048	2.5%	\$100,090	\$153,927	153.8%
Fortress Insurance Company	\$63,192	1.5%	\$63,831	\$984	1.5%
American Home Assurance Company	\$63,139	1.5%	\$62,042	\$22,424	36.1%
National Union Fire Insurance Company Of Pitt	\$55,483	1.4%	\$134,229	-\$1,079,169	-804.0%
Cincinnati Casualty Company The	\$17,985	0.4%	\$16,751	\$4,710	28.1%
Cincinnati Indemnity Company	\$10,123	0.2%	\$9,692	\$1,792	18.5%
Pharmacists Mutual Insurance Company	\$6,440	0.2%	\$5,947	\$0	0.0%
State Farm Fire And Casualty Company	\$2,469	0.1%	\$2,349	-\$189	-8.0%
Granite State Insurance Company	\$2,032	0.0%	\$5,498	-\$4,510	-82.0%
Continental Casualty Company	-\$9,149	-0.2%	\$145,232	\$365,988	252.0%

Nurses, 2018					
Insurer	Premium Written	Market Share	Premium Earned	Incurred Losses	Loss Ratio
American Casualty Company Of Reading PA	\$1,166,328	72.8%	\$510,722	\$1,253,606	245.5%
Proassurance Indemnity Company	\$290,843	18.1%	\$278,711	\$61,316	22.0%
Medical Protective Company	\$56,519	3.5%	\$39,100	-\$217,100	-555.2%
State Farm Fire And Casualty Company	\$39,046	2.4%	\$40,250	\$0	0.0%
Cincinnati Insurance Company The	\$31,918	2.0%	\$31,936	\$8,079	25.3%
Continental Insurance Company The	\$9,194	0.6%	\$0	\$0	
Hudson Insurance Company	\$6,766	0.4%	\$6,271	-\$1,149	-18.3%
Cincinnati Indemnity Company	\$1,183	0.1%	\$1,902	\$672	35.3%
Cincinnati Casualty Company The	\$1,129	0.1%	\$975	\$397	40.7%

All Other Providers, 2018					
Insurer	Premium Written	Market Share	Premium Earned	Incurred Losses	Loss Ratio
NCMIC Insurance Company	\$1,720,504	20.7%	\$1,719,347	\$143,534	8.3%
American Casualty Co Of Reading PA	\$1,235,100	14.9%	\$1,955,020	\$435,876	22.3%
Pharmacists Mutual Insurance Company	\$1,176,193	14.2%	\$1,226,559	\$49,530	4.0%
Medical Protective Company	\$783,944	9.4%	\$828,609	\$237,609	28.7%
Professional Solutions Insurance Company	\$686,365	8.3%	\$631,838	\$347,585	55.0%
Medical Liability Alliance	\$675,985	8.1%	\$630,696	\$4,572,637	725.0%
Ace American Insurance Company	\$492,383	5.9%	\$495,323	\$69,587	14.0%
Podiatry Insurance Company Of America	\$351,626	4.2%	\$356,578	\$73,671	20.7%
Church Mutual Insurance Company	\$332,345	4.0%	\$263,122	\$81,872	31.1%
Preferred Professional Insurance Company	\$217,825	2.6%	\$189,091	\$57,692	30.5%
Cincinnati Insurance Company The	\$207,415	2.5%	\$238,470	\$16,272	6.8%
Great Divide Insurance Company	\$120,048	1.4%	\$111,383	\$14,303	12.8%
Continental Insurance Company The	\$91,324	1.1%	\$34,469	\$8,314	24.1%
Paco Assurance Company	\$71,124	0.9%	\$77,246	-\$3,197	-4.1%
Continental Casualty Company	\$31,650	0.4%	\$40,082	\$84,966	212.0%
Doctors Company An Interins Exchange	\$28,020	0.3%	\$11,745	\$0	0.0%
Kansas Medical Mutual Insurance Co	\$25,689	0.3%	\$25,689	-\$10,568	-41.1%
Berkshire Hathaway Specialty Insurance Co	\$21,613	0.3%	\$65,025	\$36,016	55.4%
Kammco Casualty Company	\$8,960	0.1%	\$8,960	\$0	0.0%
Cincinnati Indemnity Company	\$8,291	0.1%	\$9,682	\$3,215	33.2%
Cincinnati Casualty Company The	\$6,839	0.1%	\$6,433	\$1,605	24.9%
Campmed Casualty & Indemnity Company	\$2,500	0.0%	\$361	\$1,452	402.2%
General Insurance Company Of America	\$1,810	0.0%	\$2,345	\$823	35.1%

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Harry S Truman Building, Room 530
301 W. High St.
PO Box 690
Jefferson City, MO 65102